

ANNUAL STATEMENT

For the Year Ended December 31, 2019

of the Condition and Affairs of the

R&Q RI Insurance Company

NAIC Group Code 4234, (Current Period) (Prio		npany Code 16206	Employer's ID Number 82-1212894
Organized under the Laws of RI	,	omicile or Port of Entry RI	Country of Domicile US
Incorporated/Organized June 23,	2017	Commenced Business	August 23, 2017
Statutory Home Office	Providence RI US 02	P (Registered Agent) 40 Westmi 903 r Town, State, Country and Zip Code)	nister St
Main Administrative Office	2 Logan Square, Suite 600 (Street and Number) (City of	Philadelphia PA US 191 or Town, State, Country and Zip Code))3 267-675-3348 (Area Code) (Telephone Number)
Mail Address	2 Logan Square, Suite 600 (Street and Number or P. O. Box,	Philadelphia PA US 191 (City or Town, State, Country and	
Primary Location of Books and Reco		Philadelphia PA US 191 r Town, State, Country and Zip Code)	267-675-3348 (Area Code) (Telephone Number)
Internet Web Site Address			
Statutory Statement Contact	Desiree Rose Mecca (Name)		267-675-3348 (Area Code) (Telephone Number) (Extension)
	Desiree.Mecca@rqih.com (E-Mail Address)		267-675-3340 (Fax Number)
		FFICERS	(i ax ivuilibei)
Name	Title	Name	Title
Pamela Susan Sellers-Hoelsken Paging Rose Masse #	President	Micheal Logan Glover	Secretary
3. Desiree Rose Mecca #	Treasurer	OTHER	
	DIRECTOR	S OR TRUSTEES	
Andrew William McCarthy	Pamela Susan Sellers-Hoelsken	John William Fischer	Christopher William Reichow
State of Pennsylvania County of Philadelphia			
stated above, all of the herein described a herein stated, and that this statement, tog of all the assets and liabilities and of the content therefrom for the period ended, and have manual except to the extent that: (1) state procedures, according to the best of their	ssets were the absolute property of the ther with related exhibits, schedules a condition and affairs of the said reporting been completed in accordance with the law may differ; or, (2) that state rules information, knowledge and belief, resinic filing with the NAIC, when required	e said reporting entity, free and clear and explanations therein contained, a ag entity as of the reporting period sta e NAIC Annual Statement Instruction or regulations require differences in a pectively. Furthermore, the scope of I, that is an exact copy (except for fo	d reporting entity, and that on the reporting period from any liens or claims thereon, except as innexed or referred to, is a full and true statement sted above, and of its income and deductions and Accounting Practices and Procedures eporting not related to accounting practices and this attestation by the described officers also matting differences due to electronic filing) of the sed statement.

(Signature) (Signature) Pamela Susan Sellers-Hoelsken Micheal Logan Glover 1. (Printed Name) 2. (Printed Name)			(Signature Desiree Rose M	,			
		2. (Printed Name)			3. (Printed Name)		
President		Secretary			Treasurer		
(Title)		(Title)			(Title)		
Subscribed an	d sworn to before me)		a. Is this a	n original filing?		Yes [X] No []
This	day of	February	2020	b. If no	1. State the amendment number		
	<u> </u>				2. Date filed		
					3. Number of pages attached		

ASSETS

		Current Year			Prior Year
		1	2 Nonadmitted	3 Net Admitted Assets	4 Net
		Assets	Assets	(Cols. 1 - 2)	Admitted Assets
1.	Bonds (Schedule D)			0	
2.	Stocks (Schedule D):				
	2.1 Preferred stocks				
	2.2 Common stocks			0	
3.	Mortgage loans on real estate (Schedule B):				
	3.1 First liens				
١,	3.2 Other than first liens			0	
4.	Real estate (Schedule A):				
	4.1 Properties occupied by the company (less \$0 encumbrances)			0	
	4.2 Properties held for the production of income (less \$0 encumbrances)			0	
	4.3 Properties held for sale (less \$0 encumbrances)			0	
5.	Cash (\$95,303, Schedule E-Part 1), cash equivalents (\$2,937,665, Schedule E-Part 2) and short-term investments (\$0, Schedule DA)	3,032,968		3,032,968	3,020,070
6.	Contract loans (including \$0 premium notes)			0	
7.	Derivatives (Schedule DB)			0	
8.	Other invested assets (Schedule BA)			0	
9.	Receivables for securities			0	
10.	Securities lending reinvested collateral assets (Schedule DL)			0	
11.	Aggregate write-ins for invested assets	0	0	0	0
12.	Subtotals, cash and invested assets (Lines 1 to 11)	3,032,968	0	3,032,968	3,020,070
13.	Title plants less \$0 charged off (for Title insurers only)			0	
14.	Investment income due and accrued			0	
15.	Premiums and considerations:				
	15.1 Uncollected premiums and agents' balances in the course of collection			0	
	15.2 Deferred premiums, agents' balances and installments booked but deferred				
	and not yet due (including \$0 earned but unbilled premiums)			0	
	15.3 Accrued retrospective premiums (\$0) and contracts subject to redetermination (\$0).			0	
16.	Reinsurance:				
	16.1 Amounts recoverable from reinsurers				
	16.2 Funds held by or deposited with reinsured companies			0	
	16.3 Other amounts receivable under reinsurance contracts				
	Amounts receivable relating to uninsured plans				
18.1	Current federal and foreign income tax recoverable and interest thereon				
18.2	Net deferred tax asset				
19.	Guaranty funds receivable or on deposit				
20.	Electronic data processing equipment and software				
21.	Furniture and equipment, including health care delivery assets (\$0)				
22.	Net adjustment in assets and liabilities due to foreign exchange rates				
23.	Receivables from parent, subsidiaries and affiliates				
24.	Health care (\$0) and other amounts receivable				
25.	Aggregate write-ins for other-than-invested assets	0	0	0	0
	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)				
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts				
28.	TOTAL (Lines 26 and 27)		0	3,032,968	3,020,070
		F WRITE-INS			
1					
	Summary of remaining write-ins for Line 11 from overflow page			0	0
	Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)				0
2501.				0	
	Summary of remaining write-ins for Line 25 from overflow page Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)				
∠ɔyy.	Totals (Lines 2001 tillough 2003 pius 2000) (Line 20 adove)	<u> </u> 0	0	0	U

LIABILITIES, SURPLUS AND OTHER FUNDS

		1 Current Year	2 Prior Year
1.	Losses (Part 2A, Line 35, Column 8)		
2.	Reinsurance payable on paid losses and loss adjustment expenses (Schedule F, Part 1, Column 6)		
3.	Loss adjustment expenses (Part 2A, Line 35, Column 9)		
4.	Commissions payable, contingent commissions and other similar charges		
5.	Other expenses (excluding taxes, licenses and fees)		
6.	Taxes, licenses and fees (excluding federal and foreign income taxes)		
7.1	Current federal and foreign income taxes (including \$0 on realized capital gains (losses))	3,582	4,020
7.2	Net deferred tax liability		
8.	Borrowed money \$0 and interest thereon \$0.		
9.	Unearned premiums (Part 1A, Line 38, Column 5) (after deducting unearned premiums for ceded reinsurance of \$0 and including warranty reserves of \$0 and accrued accident and health experience rating refunds including \$0 for medical loss ratio rebate per the Public Health Service Act)		
10.	Advance premium		
11.	Dividends declared and unpaid:		
	11.1 Stockholders		
	11.2 Policyholders		
12.	Ceded reinsurance premiums payable (net of ceding commissions)		
13.	Funds held by company under reinsurance treaties (Schedule F, Part 3, Column 20)		
14.	Amounts withheld or retained by company for account of others		
15.	Remittances and items not allocated		
16.	Provision for reinsurance (including \$0 certified) (Schedule F, Part 3, Column 78)		
17.	Net adjustments in assets and liabilities due to foreign exchange rates		
18.	Drafts outstanding		
19.	Payable to parent, subsidiaries and affiliates		
20.	Derivatives		
21.	Payable for securities		
22.	Payable for securities lending		
23.	Liability for amounts held under uninsured plans		
24.	Capital notes \$0 and interest thereon \$0.		
25.	Aggregate write-ins for liabilities	0	0
26.	Total liabilities excluding protected cell liabilities (Lines 1 through 25)	3,582	4,020
27.	Protected cell liabilities		
28.	Total liabilities (Lines 26 and 27)	3,582	4,020
29.	Aggregate write-ins for special surplus funds	0	0
30.	Common capital stock		
31.	Preferred capital stock		
32.	Aggregate write-ins for other-than-special surplus funds	0	0
33.	Surplus notes		
34.	Gross paid in and contributed surplus	2,000,000	2,000,000
35.	Unassigned funds (surplus)	29,386	16,051
36.	Less treasury stock, at cost:		
	36.10.000 shares common (value included in Line 30 \$0)		
	36.20.000 shares preferred (value included in Line 31 \$0)		
37.	Surplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 39)		
38.	TOTAL (Page 2, Line 28, Col. 3)	3,032,968	3,020,071
	DETAILS OF WRITE-INS		
	Summary of remaining write-ins for Line 25 from overflow page		
	Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)		
2903.			
	Summary of remaining write-ins for Line 29 from overflow page		
	Totals (Lines 2901 through 2903 plus 2998) (Line 29 above)	0	0
3203.			
	Summary of remaining write-ins for Line 32 from overflow page		
ა∠99.	Totals (Lines 3201 through 3203 plus 3298) (Line 32 above)	0	0

Annual Statement for the year 2019 of the R&Q RI Insurance Company STATEMENT OF INCOME

	STATEMENT OF INCOME	4	0
	UNDERWRITING INCOME	1 Current Year	2 Prior Year
1.	Premiums earned (Part 1, Line 35, Column 4)	Outlett Teal	1 Hor Tear
	DEDUCTIONS:		
2.	Losses incurred (Part 2, Line 35, Column 7)		
3.	Loss adjustment expenses incurred (Part 3, Line 25, Column 1)		
4.	Other underwriting expenses incurred (Part 3, Line 25, Column 2)	10	10
5.	Aggregate write-ins for underwriting deductions		
6.	Total underwriting deductions (Lines 2 through 5)	10	10
7.	Net income of protected cells		
8.	Net underwriting gain (loss) (Line 1 minus Line 6 plus Line 7)	(10)	(10)
	INVESTMENT INCOME		
9.	Net investment income earned (Exhibit of Net Investment Income, Line 17)		
10.	Net realized capital gains (losses) less capital gains tax of \$0 (Exhibit of Capital Gains (Losses))		
11.	Net investment gain (loss) (Lines 9 + 10)	17,067	19,821
40	OTHER INCOME		
12.	Net gain (loss) from agents' or premium balances charged off (amount recovered \$0 amount charged off \$0	٥	
13.	Finance and service charges not included in premiums.		
14.	Aggregate write-ins for miscellaneous income		
15.			
16.			
	income taxes (Lines 8 + 11 + 15)	17,057	19,811
17.	Dividends to policyholders		
18.	Net income, after dividends to policyholders, after capital gains tax and before all other federal and foreign		
	income taxes (Line 16 minus Line 17)		
19.	Federal and foreign income taxes incurred		
20.	Net income (Line 18 minus Line 19) (to Line 22)	13,335	15,651
	CAPITAL AND SURPLUS ACCOUNT		
21.	Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2)		
22.	Net income (from Line 20)		
23.	Net transfers (to) from Protected Cell accounts		
24.	Change in net unrealized capital gains or (losses) less capital gains tax of \$0		
25.	Change in net unrealized foreign exchange capital gain (loss)		
26.	Change in net deferred income tax		
27.	Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 28, Column 3)		
28.	Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1)		
	Change in surplus notes		
31. 32.	Cumulative effect of changes in accounting principles		
32.	Capital changes: 32.1 Paid in		
	32.2 Transferred from surplus (Stock Dividend)		
	32.3 Transferred to surplus.		
33	Surplus adjustments:		
00.	33.1 Paid in		
	33.2 Transferred to capital (Stock Dividend)		
	33.3. Transferred from capital.		
34.	Net remittances from or (to) Home Office		
35.	Dividends to stockholders		
36.	Change in treasury stock (Page 3, Lines 36.1 and 36.2, Column 2 minus Column 1)		
37.	Aggregate write-ins for gains and losses in surplus		
38.	Change in surplus as regards policyholders for the year (Lines 22 through 37)		
39.	Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 37)		
	DETAILS OF WRITE-INS	<u> </u>	
0501.			
	Summary of remaining write-ins for Line 5 from overflow page		
	Totals (Lines 0501 through 0503 plus 0598) (Line 5 above)		
	Summary of remaining write-ins for Line 14 from overflow page		
	Totals (Lines 1401 through 1403 plus 1498) (Line 14 above)		
	Totals (Eliso 1161 tillodgil 1160 pide 1160) (Eliso 11 dosto)		
3702.			
3703.			
	Summary of remaining write-ins for Line 37 from overflow page		
3799.	Totals (Lines 3701 through 3703 plus 3798) (Line 37 above)	0	0

CASH FLOW

	OAOIII EOW	1	2
	A A OU FROM OBERATIONS	Current Year	Prior Year
	CASH FROM OPERATIONS		
	Premiums collected net of reinsurance		
	Net investment income	, i	19,821
	Miscellaneous income		
	Total (Lines 1 through 3)		
	Benefit and loss related payments		
	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		
	Commissions, expenses paid and aggregate write-ins for deductions		
	Dividends paid to policyholders		
	Federal and foreign income taxes paid (recovered) net of \$0 tax on capital gains (losses)	1	
	Total (Lines 5 through 9)		
11. N	Net cash from operations (Line 4 minus Line 10)	12,897	19,671
	CASH FROM INVESTMENTS		
	Proceeds from investments sold, matured or repaid:		
	12.1 Bonds		
	12.2 Stocks		
	12.3 Mortgage loans		
	12.4 Real estate		
	12.5 Other invested assets		
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments		
	12.7 Miscellaneous proceeds		
	12.8 Total investment proceeds (Lines 12.1 to 12.7)	0	0
	Cost of investments acquired (long-term only):		
	13.1 Bonds		
	13.2 Stocks		
	13.3 Mortgage loans		
	13.4 Real estate		
	13.5 Other invested assets		
	13.6 Miscellaneous applications		
	13.7 Total investments acquired (Lines 13.1 to 13.6)		
	Net increase (decrease) in contract loans and premium notes		
15. I	Net cash from investments (Line 12.8 minus Lines 13.7 minus Line 14)	0	0
	CASH FROM FINANCING AND MISCELLANEOUS SOURCES		
16. (Cash provided (applied):		
1	16.1 Surplus notes, capital notes		
1	16.2 Capital and paid in surplus, less treasury stock		
1	16.3 Borrowed funds		
1	16.4 Net deposits on deposit-type contracts and other insurance liabilities		
1	16.5 Dividends to stockholders	1	
	16.6 Other cash provided (applied)		
17. N	Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)	0	(101
	RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		
18. I	Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	12,897	19,570
	Cash, cash equivalents and short-term investments:		
1	19.1 Beginning of year		3,000,500
1	19.2 End of year (Line 18 plus Line 19.1)	3.032.967	3.020.070

Note: Supplemental disclosures of cash flow information for non-cash transactions:

20.0001

Underwriting and Investment Ex Pt. 1 - Ex. of Premiums Earned NONE
Underwriting and Investment Ex Pt. 1A - Recapitulation of All Premiums NONE
Underwriting and Investment Ex Pt. 1B - Ex. Premiums Written NONE
Underwriting and Investment Ex Pt. 2 - Losses Paid and Incurre NONE
Underwriting and Investment Ex Pt. 2A - Unpaid Losses and Loss Adjustment Expenses

Annual Statement for the year 2019 of the R&Q RI Insurance Company **UNDERWRITING AND INVESTMENT EXHIBIT**

PART 3 - EXPENSES

	FAR	I 3 - EXPENSES			
		1 Loss Adjustment Expenses	2 Other Underwriting Expenses	3 Investment Expenses	4 Total
1.	Claim adjustment services:	ZAPONOCO			
	1.1 Direct				0
	1.2 Reinsurance assumed				0
	1.3 Reinsurance ceded				0
	1.4 Net claim adjustment services (1.1 + 1.2 - 1.3)				
2.	Commission and brokerage:				
	2.1 Direct, excluding contingent				0
	2.2 Reinsurance assumed, excluding contingent				0
	2.3 Reinsurance ceded, excluding contingent				0
	2.4 Contingent - direct				0
	2.5 Contingent - reinsurance assumed				0
	2.6 Contingent - reinsurance ceded				0
	2.7 Policy and membership fees				0
	2.8 Net commission and brokerage (2.1 + 2.2 - 2.3 + 2.4 + 2.5 - 2.6 + 2.7)			0	0
3.	Allowances to manager and agents				0
4.	Advertising				0
5.	Boards, bureaus and associations				0
6.	Surveys and underwriting reports				
7.	Audit of assureds' records				
8.	Salary and related items:				
٠.	8.1 Salaries				0
	8.2 Payroll taxes				0
9.	Employee relations and welfare				0
10.	Insurance				0
11.	Directors' fees				0
12.	Travel and travel items.				
13.	Rent and rent items				0
14	Equipment				0
15					0
16.	Printing and stationery.				0
17.	Postage, telephone and telegraph, exchange and express				0
18.	Legal and auditing				671
19.	Totals (Lines 3 to 18)		0	671	
20.	Taxes, licenses and fees:	0	0	071	071
20.	20.1 State and local insurance taxes deducting guaranty association credits				
	of \$0				0
	20.2 Insurance department licenses and fees		10		10
	20.3 Gross guaranty association assessments				
	20.4 All other (excluding federal and foreign income and real estate)				
	20.5 Total taxes, licenses and fees (20.1 + 20.2 + 20.3 + 20.4)			0	
21.	Real estate expenses				_
22.	Real estate taxes.				0
23.	Reimbursements by uninsured plans				0
23. 24.	Aggregate write-ins for miscellaneous expenses				
24. 25.	Total expenses incurred		10	671	
26.	Less unpaid expenses - current year.		10		ω)
20. 27.	Add unpaid expenses - prior year				0
28.	Amounts receivable relating to uninsured plans, prior year				0
29. 30.	Amounts receivable relating to uninsured plans, current year TOTAL EXPENSES PAID (Lines 25 - 26 + 27 - 28 + 29)				
SU.			10	b/1	681
2401.		AILS OF WRITE-INS			0
2401. 2402.					0
2402. 2403.					
	Summary of remaining write-ins for Line 24 from overflow page		0	0	-
	Totals (Lines 2401 through 2403 plus 2498) (Line 24 above)		0	0	0

(a) Includes management fees of $\dots 0$ to affiliates and $\dots 0$ to non-affiliates.

Annual Statement for the year 2019 of the R&Q RI Insurance Company EXHIBIT OF NET INVESTMENT INCOME

		1 Collected During Year	2 Earned During Year
1.	U.S. government bonds	•	•
1.1	Bonds exempt from U.S. tax	' '	
1.2	Other bonds (unaffiliated)		
1.3	Bonds of affiliates	(a)	
2.1	Preferred stocks (unaffiliated)		
2.11	Preferred stocks of affiliates	' '	
2.2	Common stocks (unaffiliated)		
2.21	Common stocks of affiliates		
3.	Mortgage loans	(c)	
4.	Real estate		
5.	Contract loans		
6.	Cash, cash equivalents and short-term investments	(e)17,738	17,738
7.	Derivative instruments	(f)	
8.	Other invested assets		
9.	Aggregate write-ins for investment income		0
10.	Total gross investment income	17,738	17,738
11.	Investment expenses	•	
12.	Investment taxes, licenses and fees, excluding federal income taxes		(g)
13.	Interest expense		(h)
14.	Depreciation on real estate and other invested assets		(i)0
15.	Aggregate write-ins for deductions from investment income		0
16.	Total deductions (Lines 11 through 15)		671
17.	Net investment income (Line 10 minus Line 16)		17,067
	DETAILS OF WRITE-INS		
0901.			
0902.			
0903.			
0998.	Summary of remaining write-ins for Line 9 from overflow page	0	0
	Totals (Lines 0901 through 0903 plus 0998) (Line 9 above)		
1501.			
1502.			
1503.			
1598.	Summary of remaining write-ins for Line 15 from overflow page		0
1599.	Totals (Lines 1501 through 1503 plus 1598) (Line 15 above)		0
(a)	Includes \$0 accrual of discount less \$0 amortization of premium and less \$0 paid for accrued interest		
(b)	Includes \$0 accrual of discount less \$0 amortization of premium and less \$0 paid for accrued dividen		
(c)	Includes \$0 accrual of discount less \$0 amortization of premium and less \$0 paid for accrued interest		
(d)	Includes \$0 for company's occupancy of its own buildings; and excludes \$0 interest on encumbrances.		
(e)	Includes \$0 accrual of discount less \$0 amortization of premium and less \$0 paid for accrued interest	t on purchases.	
. ,	Includes \$0 accrual of discount less \$0 amortization of premium.	•	
(f)			
(f) (g)	Includes \$0 investment expenses and \$0 investment taxes, licenses and fees, excluding federal income tax	ces, attributable to segregated and S	Separate Accounts.
	Includes \$0 investment expenses and \$0 investment taxes, licenses and fees, excluding federal income tax Includes \$0 interest on surplus notes and \$0 interest on capital notes.	xes, attributable to segregated and S	Separate Accounts.

EXHIBIT OF CAPITAL GAINS (LOSSES)

	EXHIBIT OF CAPITAL GAINS (LOSSES)									
		1 Realized	2	3	4	5 Change in				
		Gain (Loss)	Other	Total Realized	Change in	Unrealized				
		on Sales	Realized	Capital Gain (Loss)	Unrealized	Foreign Exchange				
		or Maturity	Adjustments	(Columns 1 + 2)	Capital Gain (Loss)	Capital Gain (Loss)				
1.	U.S. government bonds			0						
1.1	Bonds exempt from U.S. tax			0						
1.2	Other bonds (unaffiliated)			0						
1.3	Bonds of affiliates			0						
2.1	Preferred stocks (unaffiliated)			0						
2.11	Preferred stocks of affiliates			0						
2.2	Common stocks (unaffiliated)			0						
2.21	Common stocks of affiliates			0						
3.	Mortgage loans)NE	0						
4.	Real estate			0						
5.	Contract loans			0						
6.	Cash, cash equivalents and short-term investments			0						
7.	Derivative instruments			0						
8.	Other invested assets			0						
9.	Aggregate write-ins for capital gains (losses)	0	0	0	0	0				
10.	Total capital gains (losses)	0	0	0	0	0				
,		DETAILS C	F WRITE-INS							
0901.				0						
0902.				0						
0903.				0						
0998.	Summary of remaining write-ins for Line 9 from overflow page	0	0	0	0	0				
	Totals (Lines 0901 through 0903 plus 0998) (Line 9 above)		0	0	0	0				

EXHIBIT OF NONADMITTED ASSETS

		1 Current Year Total Nonadmitted Assets	2 Prior Year Total Nonadmitted Assets	3 Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1.	Bonds (Schedule D)			0
2.	Stocks (Schedule D):			
	2.1 Preferred stocks			0
	2.2 Common stocks			0
3.	Mortgage loans on real estate (Schedule B):			
	3.1 First liens			0
	3.2 Other than first liens			0
4.	Real estate (Schedule A):			
	4.1 Properties occupied by the company			0
	4.2 Properties held for the production of income			0
	4.3 Properties held for sale			0
	Cash (Schedule E-Part 1), cash equivalents (Schedule E-Part 2) and short-term investments (Schedule DA)			0
6.	Contract loans			0
	Derivatives (Schedule DB)			0
7. 8.	Other invested assets (Schedule BA)			0
9.	Receivables for securities.			-
	Securities lending reinvested collateral assets (Schedule DL)			
11.	Aggregate write-ins for invested assets			
	Subtotals, cash and invested assets (Lines 1 to 11)			
	Title plants (for Title insurers only)			0
14.	Investment income due and accrued.			
	Premiums and considerations:			0
	15.1 Uncollected premiums and agents' balances in the course of collection			0
				0
	deferred and not yet due			0
	Reinsurance:			
	16.1 Amounts recoverable from reinsurers			0
	16.2 Funds held by or deposited with reinsured companies			0
	16.3 Other amounts receivable under reinsurance contracts			0
17.	Amounts receivable relating to uninsured plans			0
18.1	Current federal and foreign income tax recoverable and interest thereon			0
18.2	Net deferred tax asset			0
19.	Guaranty funds receivable or on deposit			0
20.	Electronic data processing equipment and software			0
21.	Furniture and equipment, including health care delivery assets			0
22.	Net adjustment in assets and liabilities due to foreign exchange rates			0
23.	Receivables from parent, subsidiaries and affiliates			0
24.	Health care and other amounts receivable			0
25.	Aggregate write-ins for other-than-invested assets	0	0	0
26.	Total assets excluding Separate Accounts, Segregated Accounts and Protected			
	Cell Accounts (Lines 12 through 25)			
	From Separate Accounts, Segregated Accounts and Protected Cell Accounts			
28.	TOTALS (Lines 26 and 27)	0	0	0
	DETAILS OF W			
				0
	Summary of remaining write-ins for Line 11 from overflow page			
	Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)			
	Summary of remaining write-ins for Line 25 from overflow page			
2599.	Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	0	<u> </u> 0	0

Note 1 - Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

R&Q RI Insurance Company is a 2017 formed insurance company domiciled in Rhode Island. It was incorporated on June 23, 2017 and authorized to commence business on August 23, 2017.

The financial statements of the R&Q RI Insurance Company ("the Company") are presented on the basis of accounting practices prescribed or permitted by the Rhode Island Department of Insurance.

The Rhode Island Department of Insurance recognizes only statutory accounting practices prescribed or permitted by the state of Rhode Island for determining and reporting the financial condition and results of operations of an insurance company, for purposes of determining its solvency under the Rhode Island Insurance Law. The National Association of Insurance Commissioners' ("NAIC") Accounting Practices and Procedures Manual has been adopted as a component of prescribed or permitted practices by the state of Rhode Island.

		SSAP	F/S	F/S		1	
		#		Line #	2019		2018
	T IN A SEE	#	Page	LINE#	2019		2010
NET	INCOME						
(1)	Company state basis (Page 4, Line 20, Columns 1 & 2)	XXX	XXX	XXX	\$ 13,335	\$	15,651
(2)	State Prescribed Practices that are an increase/(decrease) from NAIC SAP						
					\$	\$	
(3)	State Permitted Practices that are an increase/(decrease) from NAIC SAP						
					\$	\$	
(4)	NAIC SAP (1 – 2 – 3 = 4)	XXX	XXX	XXX	\$ 13,335	\$	15,651
SUF	RPLUS		•	•			
(5)	Company state basis (Page 3, Line 37, Columns 1 & 2)	XXX	XXX	XXX	\$ 3,029,386	\$	3,016,051
(6)	State Prescribed Practices that are an increase/(decrease) from NAIC SAP						
					\$	\$	
(7)	State Permitted Practices that are an increase/(decrease) from NAIC SAP						
					\$	\$	
(8)	NAIC SAP (5-6-7=8)	XXX	XXX	XXX	\$ 3,029,386	\$	3,016,051

B. Use of Estimates in the Preparation of the Financial Statement

The preparation of financial statements in conformity with Statutory Accounting Principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities. It also requires disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the period. Actual results could differ from those estimates.

C. Accounting Policy

- Basis for Short-Term Investments
 Short term investments are stated at fair value, which approximates cost.
- (2) Basis for Bonds and Amortization Schedule Not Applicable
- (3) Basis for Common Stocks Not Applicable
- (4) Basis for Preferred Stocks Not Applicable
- (5) Basis for Mortgage Loans Not Applicable
- (6) Basis for Loan-Backed Securities and Adjustment Methodology Not Applicable
- (7) Accounting Policies for Investments in Subsidiaries, Controlled and Affiliated Entities Not Applicable
- (8) Accounting Policies for Investments in Joint Ventures, Partnerships and Limited Liability Entities Not Applicable
- (9) Accounting Policies for Derivatives Not Applicable
- (10) Anticipated Investment Income Used in Premium Deficiency Calculation
 Not Applicable
- (11) Management's Policies and Methodologies for Estimating Liabilities for Losses and Loss/Claim Adjustment Expenses Not Applicable
- (12) Changes in the Capitalization Policy and Predefined Thresholds from Prior Period Not Applicable

- (13) Method Used to Estimate Pharmaceutical Rebate Receivables Not Applicable
- D. Going Concern

Not Applicable

Note 2 – Accounting Changes and Correction of Errors

The Company did not have any material changes in accounting principles and/or corrections of errors.

Note 3 - Business Combinations and Goodwill

A. Statutory Purchase Method

Not Applicable

B. Statutory Merger

Not Applicable

C. Impairment Loss

Not Applicable

Note 4 - Discontinued Operations

A. Discontinued Operation Disposed of or Classified as Held for Sale

Not Applicable

B. Change in Plan of Sale of Discontinued Operation

Not Applicable

C. Nature of any Significant Continuing Involvement with Discontinued Operations After Disposal

Not Applicable

D. Equity Interest Retained in the Discontinued Operation After Disposal

Not Applicable

Note 5 - Investments

A. Mortgage Loans

Not Applicable

B. Debt Restructuring

Not Applicable.

C. Reverse Mortgages

Not Applicable.

D. Loan-Backed Securities

Not Applicable

E. Dollar Repurchase Agreements and/or Securities Lending Transactions

Not Applicable

F. Repurchase Agreements Transactions Accounted for as Secured Borrowing

Not Applicable.

G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing

Not Applicable.

H. Repurchase Agreements Transactions Accounted for as a Sale

Not Applicable.

I. Reverse Repurchase Agreements Transactions Accounted for as a Sale

Not Applicable.

J. Real Estate

Not Applicable

K. Low-Income Housing Tax Credits (LIHTC)

Not Applicable

L. Restricted Assets

(1) Restricted Assets (Including Pledged)

1) Restricted Assets (Incit	iding r icagea)						
		Gross	(Admitted &	Nonadmitted)	Restricted		
			Current	Year		6	7
	1	2	3	4	5	Ī	
				Protected Cell			
		G/A Supporting	Total Protected	Account Assets			Increase/
	Total General	Protected Cell	Call Account (S/A)	Supporting G/A	Total	Total From Prior	(Decrease) (5
Restricted Asset Category	Account (G/A)	Account Activity (a)	Restricted Assets	Activity (b)	(1 plus 3)	Year	minus 6)
a. Subject to contractual							
obligation for which							
liability is not shown	\$	\$	\$	\$	\$	\$	\$
b. Collateral held under							
security lending							
arrangements							
c. Subject to repurchase							
agreements							
d. Subject to reverse							
repurchase agreements							
e. Subject to dollar							
repurchase agreements							
f. Subject to dollar reverse							
repurchase agreements							
g. Placed under option							
contracts							
h. Letter stock or securities							
restricted as to sale –							
excluding FHLB capital							
stock							
i. FHLB capital stock							
j. On deposit with states	103,619				103,619	101,853	1,766
k. On deposit with other	100,010				100,010	101,000	1,700
regulatory bodies							
Pledged as collateral to							
FHLB (including assets							
backing funding							
agreements)							
m. Pledged as collateral not							
captured in other							
categories							
n. Other restricted assets							
o. Total Restricted Assets	\$ 103,619	\$	\$	\$	\$ 103,619	\$ 101,853	\$ 1,766
o. Total Restricted Assets	φ 103,019	φ	Ψ	Ψ	φ 103,019	φ 101,000	ψ 1,700

			Current	Year	
		8	9	Percentage	
				10	11
				Gross (Admitted &	
			Total Admitted	Nonadmitted)	Admitted Restricted
		Total Nonadmitted	Restricted	Restricted to Total	to Total Admitted
F	Restricted Asset Category	Restricted	(5 minus 8)	Assets (c)	Assets (d)
a.	Subject to contractual				
	obligation for which				
	liability is not shown	\$	\$	%	%
b.	Collateral held under				
	security lending				
	arrangements			%	%
C.	Subject to repurchase				
	agreements			%	%
d.	Subject to reverse				
	repurchase agreements			%	%
e.	Subject to dollar				
	repurchase agreements			%	%
f.					
	repurchase agreements			%	%
g.	Placed under option				
	contracts			%	%
h.	Letter stock or securities				
	restricted as to sale -				
	excluding FHLB capital				
_	stock			%	%
i.	FHLB capital stock			%	%
j.	On deposit with states		103,619	3.4%	3.4%
k.	On deposit with other				
	regulatory bodies			%	%
I.	Pledged as collateral to				
	FHLB (including assets				
	backing funding				
	agreements)			%	%

		Current Year				
	8	9	Percentage			
			10	11		
			Gross (Admitted &			
		Total Admitted	Nonadmitted)	Admitted Restricted		
	Total Nonadmitted	Restricted	Restricted to Total	to Total Admitted		
Restricted Asset Category	Restricted	(5 minus 8)	Assets (c)	Assets (d)		
m. Pledged as collateral not						
captured in other categories			%	%		
n. Other restricted assets			%	%		
o. Total Restricted Assets	\$	\$ 103,619	3.4%	3.4%		

- (a) Subset of column 1
- (b) Subset of column 3
- (c) Column 5 divided by Asset Page, Column 1, Line 28
- (d) Column 9 divided by Asset Page, Column 3, Line 28
- (2) Detail of Assets Pledged as Collateral Not Captured in Other Categories (Contacts that Share Similar Characteristics, Such as Reinsurance and Derivatives, are Reported in the Aggregate)

Not Applicable

- (3) Detail of Other Restricted Assets (Contracts that Share Similar Characteristics, such as Reinsurance and Derivatives, are Reported in the Aggregate)

 Not Applicable
- (4) Collateral Received and Reflected as Assets Within the Reporting Entity's Financial Statements

Not Applicable

M. Working Capital Finance Investments

Not Applicable

N. Offsetting and Netting of Assets and Liabilities

Not Applicable.

O. 5GI Securities

Not Applicable.

P. Short Sales

Not Applicable.

Q. Prepayment Penalty and Acceleration Fees

Not Applicable

Note 6 - Joint Ventures, Partnerships and Limited Liability Companies

A. Investments in Joint Ventures, Partnerships and Limited Liability Companies that Exceed 10% of Ownership

Not Applicable

B. Investments in Impaired Joint Ventures, Partnerships and Limited Liability Companies

Not Applicable

Note 7 - Investment Income

A. The bases, by category of investment income, for excluding (nonadmitting) any investment income due and accrued:

The Company does not admit investment income due and accrued if amounts are over 90 days past due.

B. The total amount excluded:

\$Not Applicable

Note 8 - Derivative Instruments

A.-B. Purpose, Risks, Accounting

Not Applicable

Note 9 - Income Taxes

R& Q RI Insurance Company is a 2017 formed insurance company domiciled in Rhode Island. It was incorporated on June 23, 2017 and authorized to commence business on August 23, 2017. At December 31, 2019 there was no business written and minimal activity on the books and a current tax provision of 21% was recorded.

A. Deferred Tax Assets/(Liabilities) - Not Applicable

1. Components of Net Deferred Tax Asset/(Liability)

	Components of Net Deferred Tax Asset/(Liability)									
			2019			2018			Change	
		1	2	3 (Col 1+2)	4	5	6 (Col 4+5)	7 (Col 1-4)	8 (Col 2-5)	9 (Col 7+8)
		Ordinary	Capital	Total	Ordinary	Capital	Total	Ordinary	Capital	Total
a.	Gross deferred tax assets	\$	\$	\$	\$	\$	\$	\$	\$	\$
b.	Statutory valuation allowance adjustment									
C.	Adjusted gross deferred tax assets (1a-1b)	\$	\$	\$	\$	\$	\$	\$	\$	\$
d.	Deferred tax assets nonadmitted									
e.	Subtotal net admitted deferred tax asset (1c-1d)	\$	\$	\$	\$	\$	\$	\$	\$	\$
f.	Deferred tax liabilities									
g.	Net admitted deferred tax assets/(net deferred	\$	\$	\$	¢	\$	¢	¢	¢	\$
	tax liability) (1e-1f)	Ψ	Ψ	φ	Ψ	Ψ	Ψ	Ψ	Ψ	Ψ

2. Admission Calculation Components SSAP No. 101

A	Admission Calculation Components SSAP No. 101									
			2019			2018			Change	
		1	2	3 (Col 1+2)	4	5	6 (Col 4+5)	7 (Col 1-4)	8 (Col 2-5)	9 (Col 7+8)
		Ordinary	Capital	Total	Ordinary	Capital	Total	Ordinary	Capital	Total
a.	taxes paid in prior years recoverable through loss	\$	\$	\$	\$	\$	\$	\$	\$	\$
b.	•	Į.					•	•	•	•
C.	Adjusted gross deferred tax assets allowed per limitation threshold Adjusted gross		I							
	deferred tax assets (excluding the amount of deferred tax assets from 2(a) and 2(b) above) offset by gross deferred tax liabilities									
d.	Deferred tax assets admitted as the result of application of SSAP 101. Total (2(a)+2(b)+2(c))	\$	\$	\$	\$	\$	\$	\$	\$	\$

3. Other Admissibility Criteria

		2019	2018
a.	Ratio percentage used to determine recovery period and threshold limitation amount	%	%
b.	Amount of adjusted capital and surplus used to determine recovery period and threshold		
	limitation in 2(b)2 above	\$	\$

4. Impact of Tax Planning Strategies

(a) <u>Determination of adjusted gross</u> deferred tax assets and net admitted deferred tax assets, by tax character as a percentage.

Determination of adjusted gross deferred tax assets and het admitted deferred tax assets, by tax character as a percentage.						
	2019		2018		Change	
	1	2	3	4	5	6

	Ordinary	Capital	Ordinary	Capital	(Col. 1-3) Ordinary	(Col. 2-4) Capital
Adjusted gross DTAs amount from Note			_			
9A1(c)	\$	\$	\$	\$	\$	\$
Percentage of adjusted gross DTAs by tax character attributable to the impact of tax planning strategies	%	%	%	%	%	%
Net Admitted Adjusted Gross DTAs amount from Note 9A1(e)	\$	\$	\$	\$	\$	\$
Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax planning	%	0/6	0/6	96	0/6	%
	amount from Note 9A1(c) Percentage of adjusted gross DTAs by tax character attributable to the impact of tax planning strategies Net Admitted Adjusted Gross DTAs amount from Note 9A1(e) Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact	Adjusted gross DTAs amount from Note 9A1(c) \$ Percentage of adjusted gross DTAs by tax character attributable to the impact of tax planning strategies % Net Admitted Adjusted Gross DTAs amount from Note 9A1(e) \$ Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax planning	Adjusted gross DTAs amount from Note 9A1(c) \$ Percentage of adjusted gross DTAs by tax character attributable to the impact of tax planning strategies % % % Net Admitted Adjusted Gross DTAs amount from Note 9A1(e) \$ Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax planning	Adjusted gross DTAs amount from Note 9A1(c) \$ \$ Percentage of adjusted gross DTAs by tax character attributable to the impact of tax planning strategies % % % % Net Admitted Adjusted Gross DTAs amount from Note 9A1(e) \$ Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax planning	Adjusted gross DTAs amount from Note 9A1(c) \$ \$ \$ \$ Percentage of adjusted gross DTAs by tax character attributable to the impact of tax planning strategies % % % % % % Net Admitted Adjusted Gross DTAs amount from Note 9A1(e) \$ \$ \$ Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax planning	Adjusted gross DTAs amount from Note 9A1(c) \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$

- (b) Does the company's tax planning strategies include the use of reinsurance? $\underline{\text{NO}}$
- B. Deferred Tax Liabilities Not Recognized Not Applicable
- C. Current and Deferred Income Taxes
 - 1. Current Income Tax

	1	2	3
			(Col 1-2)
	2019	2018	Change
a. Federal	\$ 3,722	\$ 4,160	\$ (438)
b. Foreign	\$	\$	\$
c. Subtotal	\$ 3,722	\$ 4,160	\$ (438)
d. Federal income tax on net capital gains	\$	\$	\$
e. Utilization of capital loss carry-forwards	\$	\$	\$
f. Other	\$	\$	\$
g. Federal and Foreign income taxes incurred	\$ 3,722	\$ 4,160	\$ (438)

2. Deferred Tax Assets

2019	2 2018	3 (Col 1-2) Change
	2018	
	2018	Change
\$		
\$		T_
	\$	\$
		_
\$	\$	\$
\$	\$	\$
•		<u>.</u>
\$	\$	\$
1	1	
\$	\$	\$
\$	\$	\$
	\$	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$

3.	Deferred Tax Liabilities			
		1	2	3
				i

		2019	2018	(Col 1-2) Change
a.	Ordinary:	1	T	1
	1. Investments	\$	\$	\$
	2. Fixed assets			
	Deferred and uncollected premium			
	Policyholder reserves			
	5. Other (items <=5% and >5% of total ordinary tax liabilities)			
	Other (items listed individually >5% of total ordinary tax liabilities)			
	99. Subtotal	\$	\$	\$
b.	Capital:			
	1. Investments	\$	\$	\$
	2. Real estate			
	3. Other (Items <=5% and >5% of total capital tax liabilities)			
	Other (items listed individually >5% of total capital tax liabilities)	T		T
	99. Subtotal	\$	\$	\$
C.	Deferred tax liabilities (3a99+3b99)	\$	\$	\$
Ne	t Deferred Tax Assets/Liabilities (2i – 3c)	\$	\$	\$

D. Reconciliation of Federal Income Tax Rate to Actual Effective Rate Among the more significant book to tax adjustments were the following:

	Amount	Effective Tax Rate (%
Permanent Differences:		
Provision computed at statutory rate	\$	
Change in nonadmitted assets		
Proration of tax exempt investment income		
Tax exempt income deduction		
Dividends received deduction		
Disallowed travel and entertainment		
Other permanent differences		
Temporary Differences:		
Total ordinary DTAs		
Total ordinary DTLs		
Total capital DTAs		
Total capital DTLs		
Other:		
Statutory valuation allowance adjustment		
Accrual adjustment – prior year		
Other		
Totals	\$	
Federal and foreign income taxes incurred		3,722 21.
Realized capital gains (losses) tax		
Change in net deferred income taxes		
Total statutory income taxes	\$	3,722 21.021.

E. Operating Loss Carry Forwards and Income Taxes Available for Recoupment

1. The amounts, origination dates and expiration dates of operating loss and tax credit carry forwards available for tax purposes:

	to the opening to the time to the time	ing to the body and the body an	
Description (Operating Loss or Tax Credit Carry Forward)	Amounts	Origination Dates	Expiration Dates
	\$		

2. The following is income tax expense for current year and proceeding years that is available for recoupment in the event of future net losses:

Yea	Amounts	
		\$

3. The Company's aggregate amount of deposits admitted under Section 6603 of the Internal Revenue Service Code

F. Consolidated Federal Income Tax Return

1. The Company's federal income tax return is consolidated with the following entities:

Randall & Quilter America Holdings Inc.

R&Q Solutions LLC

R&Q Quest PCC, LCC

RSI Solutions International, Inc.

Excess and Treaty Management Corporation

Requiem America, Inc.

R&Q Services Holding Inc.

Accredited Holding Corporation

Accredited Surety and Casualty Company, Inc.

Accredited Bond Agencies, Inc.

Accredited Group Agency, Inc.
R&Q Healthcare Interest, LLC
Randall & Quilter Healthcare Holdings, Inc.
Transport Insurance Company
R&Q Reinsurance Company
Syndicated Services Company, Inc.
R&Q RI Insurance Company
ICDC, Ltd.
Global Reinsurance Corporation of America
Global US Holdings, Inc.
Grafton US Holdings
LBL Acquisition
Risk Transfer Underwriting, Inc.

2. The manner in which the Board of Directors sets forth for allocating the consolidated federal income tax:

Randall & Quilter America Holdings Inc. maintains a tax sharing agreement with its subsidiaries, approved by the Board of Directors, whereby allocation of the tax liability is made primarily on a separate return basis, with current credit given for net losses utilized in the consolidated return.

The method of allocation among companies is subject to a written agreement, approved by the Board of Directors, whereby allocation is made primarily on a separate return basis with current credit for any net operating losses or other items utilized in the consolidated tax return.

G. Federal or Foreign Federal Income Tax Loss Contingencies:

National Legacy Insurance Company

Not Applicable

H. Repatriation Transition Tax (RTT) - RTT owed under the TCJA

Not Applicable

I. Alternative Minimum Tax Credit

Not Applicable

Note 10 - Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties

A. Nature of the Relationship Involved

The Company is a direct 100% owned subsidiary of Randall & Quilter America Holdings Inc. which in turn is a wholly-owned subsidiary of Randall & Quilter Investment Holdings Ltd. See Schedule Y, Part 1, Organizational Chart.

B. Transactions

Not Applicable

C. Dollar Amounts of Transactions

Change in terms of Intercompany Arrangements –Intercompany agreements have been amended to include any new entities. Certain expenses are shared between Group companies on an equitable basis.

D. Amounts Due From or To Related Parties

Amounts Due to or from Related Parties - As of December 31, 2019, the Company has no amounts due from (to) related parties.

E. Guarantees or Undertakings

None

F. Material Management or Service Contracts and Cost-Sharing Arrangements

The Company is part of a Service Agreement with its immediate parent, Randall & Quilter America Holdings, Inc. The cost sharing agreement is amended from time to time and approved by the applicable regulators.

G. Nature of the Control Relationship

Not Applicable

H. Amount Deducted from the Value of Upstream Intermediate Entity or Ultimate Parent Owned

Not Applicable

I. Investments in SCA that Exceed 10% of Admitted Assets

Not Applicable

J. Investments in Impaired SCAs

Not Applicable

K. Investment in Foreign Insurance Subsidiary

Not Applicable

L. Investment in Downstream Noninsurance Holding Company

Not	Apr	olica	ble
1401	, , , b	Jiiou	DIC

M. All SCA Investments

Not Applicable

N. Investment in Insurance SCAs

Not Applicable

O. SCA or SSAP 48 Entity Loss Tracking

Not Applicable.

Note 11 - Debt

A. Debt, Including Capital Notes

Not Applicable

B. FHLB (Federal Home Loan Bank) Agreements

Not Applicable

Note 12 - Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans

A. Defined Benefit Plan

Not Applicable

B. Investment Policies and Strategies

Not Applicable

C. Fair Value of Plan Assets

Not Applicable

D. Basis Used to Determine Expected Long-Term Rate-of-Return

Not Applicable

E. Defined Contribution Plans

Not Applicable

F. Multiemployer Plans

Not Applicable

G. Consolidated/Holding Company Plans

Not Applicable

H. Postemployment Benefits and Compensated Absences

Not Applicable

I. Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17)

Not Applicable

${\bf Note~13-Capital~and~Surplus,~Shareholder's~Dividend~Restrictions~and~Quasi-Reorganizations}$

(1) Number of Shares and Par or Stated Value of Each Class

The Company has 10,000 shares of common stock authorized with a par value of \$100 per share.

(2) Dividend Rate, Liquidation Value and Redemption Schedule of Preferred Stock Issues

Not Applicable

(3) Dividend Restrictions

Without the prior approval of its domiciliary commissioner, dividends to shareholders are limited by the laws of the Company's state of incorporation, Rhode Island, to zero, an amount that is based on restrictions relating to statutory surplus.

(4) Dates and Amounts of Dividends Paid

Not Applicable

(5) Profits that may be Paid as Ordinary Dividends to Stockholders

	Not Applicable
(6)	Restrictions Placed on Unassigned Funds (Surplus)
	There are no restrictions on unassigned funds(surplus).
(7)	Amount of Advances to Surplus not Repaid
	Not Applicable
(8)	Amount of Stock Held for Special Purposes
	Not Applicable
(9)	Reasons for Changes in Balance of Special Surplus Funds from Prior Period
	Not Applicable
(10)	The Portion of Unassigned Funds (Surplus) Represented or Reduced by Unrealized Gains and Losses is: \$0.
(11)	The Reporting Entity Issued the Following Surplus Debentures or Similar Obligations
	Not Applicable
(12)	The impact of any restatement due to prior quasi-reorganizations is as follows
	Not Applicable
(13)	Effective Date of Quasi-Reorganization for a Period of Ten Years Following Reorganization
	Not Applicable
Note 1	4 – Liabilities, Contingencies and Assessments
A.	Contingent Commitments
	Not Applicable
В.	Assessments
	Not Applicable
C.	Gain Contingencies
	Not Applicable
D.	Claims Related Extra Contractual Obligation and Bad Faith Losses Stemming from Lawsuits
	Not Applicable
E.	Product Warranties
	Not Applicable
F.	Joint and Several Liabilities
	Not Applicable
G.	All Other Contingencies
	Not Applicable
Note 1	5 – Leases
AB.	Not Applicable
Note 1	6 – Information about Financial Instruments with Off-Balance Sheet Risk and Financial Instruments with Concentrations of Credit Risk
14.	Not Applicable
Note 1	7 – Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities
A.	Transfers of Receivables Reported as Sales
	Not Applicable

B.

Transfer and Servicing of Financial Assets

Not Applicable

C. Wash Sales

Not Applicable.

Note 18 – Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans

A.-C. Not Applicable

Note 19 – Direct Premium Written/Produced by Managing General Agents/Third Party Administrators

Not Applicable

Note 20 - Fair Value Measurements

A. Fair Value Measurements

Not Applicable

B. Fair Value Reporting under SSAP 100 and Other Accounting Pronouncements

Not Applicable

C. Fair Value Level

	Agg	regate Fair						Net Asset Value	Not Practicable
Type of Financial Instrument		Value	Ad	mitted Assets	(Level 1)	(Level 2)	(Level 3)	(NAV)	(Carrying Value)
Cash, Cash Equivalent, & Short									
Term Investment	\$	3,032,968	\$	3,032,968	\$ 3,032,968	\$	\$	\$	\$
Total:	\$	3 032 968	\$	3 032 968	\$ 3 032 968	\$	\$	\$	\$

D. Not Practicable to Estimate Fair Value

Not Applicable

E. NAV Practical Expedient Investments

Not Applicable

Note 21 - Other Items

A. Unusual or Infrequent Items

Not Applicable

B. Troubled Debt Restructuring Debtors

Not Applicable

C. Other Disclosures

Not Applicable

D. Business Interruption Insurance Recoveries

Not Applicable

E. State Transferable and Non-Transferable Tax Credits

Not Applicable

F. Subprime Mortgage-Related Risk Exposure

Not Applicable

G. Insurance-Linked Securities (ILS) Contracts

Not Applicable

H. The Amount that Could be Realized on Life Insurance Where the Reporting Entity is Owner and Beneficiary or has Otherwise Obtained Rights to Control the Policy

Not Applicable

Note 22 - Events Subsequent

None

Note 23 – Reinsurance

- A. Unsecured Reinsurance Recoverables None
- B. Reinsurance Recoverable in Dispute None
- C. Reinsurance Assumed and Ceded Not Applicable

D. Uncollectible Reinsurance - N

E. Commutation of Ceded Reinsurance - None

F. Retroactive Reinsurance - Not Applicable

G. Reinsurance Accounted for as a Deposit - Not Applicable

H. Disclosures for the Transfer of Property and Casualty Run-off Agreements - Not Applicable

I. Certified Reinsurer Rating Downgraded or Status Subject to Revocation - Not Applicable

J. Reinsurance Agreements Qualifying for Reinsurer Aggregation - Not Applicable

Note 24 – Retrospectively Rated Contracts and Contracts Subject to Redetermination

A - F. - Not applicable.

Note 25 - Change in Incurred Losses and Loss Adjustment Expenses

A.-B. Not Applicable

Note 26 - Intercompany Pooling Arrangements

Not Applicable

Note 27 - Structured Settlements

A.-B. Not Applicable

Note 28 - Health Care Receivables

A.-B. Not Applicable

Note 29 - Participating Policies

Not Applicable

Note 30 - Premium Deficiency Reserves

Not Applicable

Note 31 – High Deductibles

A.-B. Not Applicable

Note 32 – Discounting of Liabilities for Unpaid Losses or Unpaid Loss Adjustment Expenses

A.-C. Not Applicable

Note 33 - Asbestos/Environmental Reserves

A.-F. Not Applicable

Note 34 – Subscriber Savings Accounts

Not Applicable

Note 35 - Multiple Peril Crop Insurance

Not Applicable

Note 36 - Financial Guaranty Insurance

A.-B. Not Applicable

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES GENERAL

1.1		orting entity a member of an Insurance Holding Company System consisting of two	o or more affiliated persons, one or more of which is an insur-	er?		Yes [X	(] No []
1.2	official of similar to System F	the reporting entity register and file with its domiciliary State Insurance Commission the state of domicile of the principal insurer in the Holding Company System, a registhe standards adopted by the National Association of Insurance Commissioners (Negulatory Act and model regulations pertaining thereto, or is the reporting entity surally similar to those required by such Act and regulations?	istration statement providing disclosure substantially IAIC) in its Model Insurance Holding Company	Yes	[X]	No []	N/A []
1.3	State reg	•		100	[//]	[]	
1.4		orting entity publicly traded or a member of publicly traded group?			Y	'es [X] No[]
1.5	If the resp	onse to 1.4 is yes, provide the CIK (Central Index Key) code issued by the SEC fo	r the entity/group.	_	RQI	IH - UK	AIM
2.1	Has any reporting	change been made during the year of this statement in the charter, by-laws, articles entity?	s of incorporation, or deed of settlement of the		Υ	'es[]	No [X]
2.2	If yes, da	e of change:		_			
3.1		of what date the latest financial examination of the reporting entity was made or is be	-	_			
3.2	This date	as of date that the latest financial examination report became available from either should be the date of the examined balance sheet and not the date the report was	completed or released.	_			
3.3	the repor	of what date the latest financial examination report became available to other states ing entity. This is the release date or completion date of the examination report an lepartment or departments?		_			
3.5		inancial statement adjustments within the latest financial examination report been a t filed with departments?	accounted for in a subsequent financial	Yes	Г 1	No[]	N/A [X]
3.6		of the recommendations within the latest financial examination report been complie	d with?	Yes		10 []	N/A[X]
4.1	During th thereof u (more tha	e period covered by this statement, did any agent, broker, sales representative, not other common control (other than salaried employees of the reporting entity) received n 20 percent of any major line of business measured on direct premiums) of:	n-affiliated sales/service organization or any combination				
	4.11	sales of new business?				'es[]	
	4.12	renewals?			Y	'es[]	No [X]
4.2	receive c	e period covered by this statement, did any sales/service organization owned in wheelit or commissions for or control a substantial part (more than 20 percent of any research or the control of the cont					
	4.21	sales of new business?				'es[]	No [X]
	4.22	renewals?				'es[]	
5.1		eporting entity been a party to a merger or consolidation during the period covered	by this statement?		Y	'es[]	No [X]
5.2		wer is YES, complete and file the merger history data file with the NAIC. vide the name of entity, NAIC company code, and state of domicile (use two letter	state abbreviation) for any entity that has ecceed to exist as	2			
0.2		the merger or consolidation.	State approviation, for any criaty that has seased to exist as				
		1			2		3
					NAIC Compa		State of
		Name of Entity			Code		Domicile
6.1		eporting entity had any Certificates of Authority, licenses or registrations (including	corporate registration, if applicable) suspended or revoked				
		overnmental entity during the reporting period?			Y	es[]	No [X]
6.2	If yes, giv	e full information:					
71	Daga an	foreign (non-United States) person or entity directly or indirectly control 10% or mo	ore of the reporting entity 2			/00 [V]	1 No.C.1
7.1 7.2	If yes,	loreign (non-ornited States) person or entity directly of indirectly control 10% of the	ore or the reporting entity?		'	'es [X]] No []
1.2	7.21	State the percentage of foreign control					100.0%
	7.22	State the nationality(s) of the foreign person(s) or entity(s); or if the entity is a mut	ual or reciprocal, the nationality of its manager or				100.070
	,	attorney-in-fact and identify the type of entity(s) (e.g., individual, corporation, gove					
		1	2				
		Nationality	Type of Entity				
		United Kingdom (Direct 19.87%)	Corporate				
8.1 8.2		npany a subsidiary of a bank holding company regulated with the Federal Reserve se to 8.1 is yes, please identify the name of the bank holding company.	Board?		Υ	'es[]	No [X]
8.3	le the cor	npany affiliated with one or more banks, thrifts or securities firms?			\	'es[]	No [X]
8.4		onse to 8.3 is yes, please provide below the names and locations (city and state o	f the main office) of any affiliates regulated by a federal finan	rial	'	es[]	NO [X]
0.4		visition is visit set, please provide below the names and relations (only and state of visiting agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptro		ciai			
	Corporati	on (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliat					
			2	3	4	5	6
		1				EDIO	
		1 Affiliate Name			OCC	FDIC	SEC
9.		ne name and address of the independent certified public accountant or accounting	Location (City, State) F			FDIC	SEC
	2019 exe	ne name and address of the independent certified public accountant or accounting mption granted.	Location (City, State) F firm retained to conduct the annual audit?			FDIC	C SEC
9. 10.1	2019 exe	ne name and address of the independent certified public accountant or accounting	Location (City, State) F firm retained to conduct the annual audit? by the certified independent public accountant requirements		OCC	FDIC	
	2019 exe Has the in as allowed	ne name and address of the independent certified public accountant or accounting mption granted. Insurer been granted any exemptions to the prohibited non-audit services provided	Location (City, State) F firm retained to conduct the annual audit? by the certified independent public accountant requirements		OCC		
10.1	2019 exe Has the in as allowed If the resp Has the in	ne name and address of the independent certified public accountant or accounting mption granted. Insurer been granted any exemptions to the prohibited non-audit services provided in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Foonse to 10.1 is yes, provide information related to this exemption: Insurer been granted any exemptions related to other requirements of the Annual F	Location (City, State) Firm retained to conduct the annual audit? by the certified independent public accountant requirements Rule), or substantially similar state law or regulation?		OCC Y	'es[]	No [X]
10.1 10.2	Has the in as allower If the responsible for in Second III and III are the second II and III are the second II are th	ne name and address of the independent certified public accountant or accounting mption granted. Insurer been granted any exemptions to the prohibited non-audit services provided in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Foonse to 10.1 is yes, provide information related to this exemption:	Location (City, State) Firm retained to conduct the annual audit? by the certified independent public accountant requirements Rule), or substantially similar state law or regulation?		OCC Y		No [X]

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

10.5	Has the r	eporting entity established an Aud	lit Committee in compliance with the domiciliary state ins	surance laws?	res[]	No [X]	N/A []
10.6	If the resp	oonse to 10.5 is no or n/a, please	explain:	23, 2017 and authorized to commence business on Aug	uet		
	23, 2017	. Currently the Board of Directors		Audit Committee will be formed when the Company beg			
11.	to write b		officer/employee of the reporting entity or actuary/consul	tant associated with an actuarial consulting firm)			
	of the ind	ividual providing the statement of a					
12.1		_ 	s of a real estate holding company or otherwise hold rea	I estate indirectly?		Yes[]	No [X]
	12.11	Name of real estate holding com	npany	,			
	12.12	Number of parcels involved					0
12.2	12.13 If ves. pro	Total book/adjusted carrying value ovide explanation	ue		\$		0
	, .,	·					
13. 13.1			LIEN REPORTING ENTITIES ONLY: year in the United States manager or the United States	trustees of the reporting entity?			
13.2	Does this	statement contain all business tra	ansacted for the reporting entity through its United States	s Branch on risks wherever located?		Yes []	No []
13.3	Have the	re been any changes made to any	of the trust indentures during the year?			Yes[]	No []
13.4		, , ,	ry or entry state approved the changes?		Yes[]	No []	N/A []
14.1			officer, principal financial officer, principal accounting offi a code of ethics, which includes the following standards'			Yes [X]	No []
	` '			f interest between personal and professional relationship	s;		
	` '	•	lerstandable disclosure in the periodic reports required to inmental laws, rules and regulations;	o be filed by the reporting entity;			
	` '		iolations to an appropriate person or persons identified i	n the code; and			
		Accountability for adherence to the					
14.11	If the resp	ponse to 14.1 is no, please explain	n:				
14.2	Has the o	code of ethics for senior managers	been amended?			Yes[]	No [X]
14.21		ponse to 14.2 is yes, provide inform					
14.3	Have an	r provisions of the code of othics b	een waived for any of the specified officers?			Yes[]	No [X]
14.31	•	conse to 14.3 is yes, provide the n	• •			169[]	NO [X]
15.1	Is the rep Bank List		etter of Credit that is unrelated to reinsurance where the	issuing or confirming bank is not on the SVO		Yes []	No [X]
15.2			American Bankers Association (ABA) Routing Number a	nd the name of the issuing or confirming bank of			
	the Letter	r of Credit and describe the circum	nstances in which the Letter of Credit is triggered.	3		4	
	Ameri	can Bankers Association (ABA)		Circumstances That Can Trigger			
		Routing Number	Issuing or Confirming Bank Name	the Letter of Credit	\$	Amount	
			BOARD OF DIRECT	TORS	Ψ		
16.	le the nu	rchase or sale of all investments of	f the reporting entity passed upon either by the Board of			Yes [X]	No []
17.			permanent record of the proceedings of its Board of Dire			Yes [X]	No[]
18.	Has the r	eporting entity an established proc	cedure for disclosure to its Board of Directors or trustees	of any material interest or affiliation on the part			
	of any of	its officers, directors, trustees or re	esponsible employees that is in conflict or is likely to con	flict with the official duties of such person?		Yes [X]	No []
40			FINANCIAL			V	N
19. 20.1		· · ·	pasis of accounting other than Statutory Accounting Prinsive of Separate Accounts, exclusive of policy loans):	ciples (e.g., Generally Accepted Accounting Principles)?		Yes []	No [X]
	20.11	To directors or other officers			\$		0
	20.12	To stockholders not officers			\$		0
	20.13	Trustees, supreme or grand (Fra	**		\$		0
20.2			nd of year (inclusive of Separate Accounts, exclusive of	policy loans):	¢		0
	20.21 20.22	To directors or other officers To stockholders not officers			φ		0
	20.23	Trustees, supreme or grand (Fra	aternal only)				0
21.1			subject to a contractual obligation to transfer to another	party without the liability for such obligation			
21.2	• .	orting in the statement? ate the amount thereof at Decembe	or 31 of the current year:			Yes[]	No [X]
21.2	21.21	Rented from others	er of the current year.		\$		0
	21.22	Borrowed from others			\$		0
	21.23	Leased from others			\$		0
	21.24	Other			\$		0
22.1	Does this guaranty	statement include payments for a association assessments?	assessments as described in the Annual Statement Instr	uctions other than guaranty fund or		Yes []	No [X]
22.2	If answer						- []
	22.21	Amount paid as losses or risk ac	djustment		\$		0
	22.22	Amount paid as expenses			\$		0
	22.23	Other amounts paid			Φ		0

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

23.1	Does the	reporting entity report any amounts due from parer	nt, subsidiaries or affiliates on Page 2 of this sta	tement?		Yes[]	No [X]
23.2	If yes, inc	licate any amounts receivable from parent included	in the Page 2 amount:		\$		0
			INVESTMENT				
24.01	in the act	the stocks, bonds and other securities owned Dece ual possession of the reporting entity on said date (mber 31 of current year, over which the reportir			Yes [X]	No []
24.02	If no, give	e full and complete information, relating thereto:					
24.03		rity lending programs, provide a description of the p is carried on or off-balance sheet (an alternative is					
24.04	Does the	company's security lending program meet the requ	irements for a conforming program as outlined	in the Risk-Based Capital Instructions?	Yes[]	No []	N/A [X]
24.05	If answe	r to 24.04 is yes, report amount of collateral for con-	forming programs.		\$		0
24.06	If answe	r to 24.04 is no, report amount of collateral for other	rprograms		\$		0
24.07	of the co			n the counterparty at the outset	Yes[]	No []	N/A [X]
24.08		reporting entity non-admit when the collateral received	' '	on Agraament (MCLA) to	Yes[]	No[]	N/A [X]
24.09.		reporting entity or the reporting entity's securities lesecurities lending?	ending agent utilize the Master Securities Lendi	ng Agreement (MSLA) to	Yes[]	No []	N/A [X]
24.10	For the re	eporting entity's security lending program, state the	amount of the following as of December 31 of t	ne current year:			
	24.101	Total fair value of reinvested collateral assets report	ted on Schedule DL, Parts 1 and 2:		\$		0
	24.102	Total book adjusted/carrying value of reinvested col	lateral assets reported on Schedule DL, Parts	and 2:	\$		0
	24.103	Total payable for securities lending reported on the	liability page:		\$		0
25.1	of the rep	y of the stocks, bonds or other assets of the reporting entity or has the reporting entity sold or trans subject to Interrogatory 21.1 and 24.03.)	ferred any assets subject to a put option contra			Yes [X]	No []
25.2	•	ate the amount thereof at December 31 of the current	nt year:		•		0
	25.21	Subject to repurchase agreements			\$		0
		Subject to reverse repurchase agreements			\$		0
	25.23	Subject to dollar repurchase agreements			\$		0
	25.24	Subject to reverse dollar repurchase agreements			\$		0
	25.25	Placed under option agreements			\$		0
	25.26	Letter stock or securities restricted as sale – exclud	ling FHLB Capital Stock		\$		0
		FHLB Capital Stock			\$		0
	25.28	On deposit with states			\$	1	03,619
	25.29	On deposit with other regulatory bodies			\$		0
	25.30	Pledged as collateral – excluding collateral pledged			\$		0
	25.31	Pledged as collateral to FHLB – including assets b	acking funding agreements		\$		0
	25.32	Other			\$		0
25.3	For cateo	gory (25.26) provide the following:	T				
		1 Nature of Restriction	Des	2 cription		3 Amoun	+
		Nature of Nestriction	DC3	сприоп	\$	Amoun	
26.1	Doos the	reporting entity have any hedging transactions reporting	orted on Schodula DB2		Ψ	Yes []	No [X]
26.2	If yes, ha	s a comprehensive description of the hedging progrich a description with this statement. The program of the hedging program of the hedgi	ram been made available to the domiciliary stat	e?	Yes[]	No []	N/A [X]
26.3 26.4	Does the	reporting entity utilize derivatives to hedge variable conse to 26.3 is yes, does the reporting entity utilize	annuity guarantees subject to fluctuations as a	results of interest rate sensitivity?		Yes[]	No [X]
	26.41	Special accounting provision of SSAP No. 108				Yes[]	No [X]
		Permitted accounting practice				Yes []	No [X]
		Other accounting guidance				Yes []	No [X]
26.5		nding yes to 26.41 regarding utilizing the special ac		ting entity attests to the following:		Yes []	No [X]
		e reporting entity has obtained explicit approval from	•	M 04			
		dging strategy subject to the special accounting pro tuarial certification has been obtained which indicate					
		erves and provides the impact of the hedging strate					
	He	ancial Officer Certification has been obtained which dging Strategy within VM-21 and the Clearly Define ual day-to-day risk mitigation efforts.					
27.1	Were any	v preferred stocks or bonds owned as of December le into equity?	31 of the current year mandatorily convertible in	nto equity, or, at the option of the issuer,		Yes[]	No [X]
27.2		ate the amount thereof at December 31 of the curre	nt year:		\$	· ·	0
28.	offices, v	g items in Schedule E-Part 3-Special Deposits, real aults or safety deposit boxes, were all stocks, bonds agreement with a qualified bank or trust company i	s and other securities, owned throughout the cun accordance with Section 1, III - General Exam	rrent year held pursuant to a ination Considerations, F. Outsourcing			
		Functions, Custodial or Safekeeping Agreements				Yes [X]	No []
	28.01	For agreements that comply with the requirements	ot the NAIC Financial Condition Examiners Hai				
		Name of Cu	stodian(s)	2 Custodian's A	ddress		
		Washington Trust Wealth Management		P.O. Box 512, Westerly, RI 02891			

29.1

29.2

29.3

30.

30.4

31.1 31.2

31.3

32.1 32.2

33.

34.

Has the reporting entity self-designated PLGI securities?

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

28.02	For all agreements that do not comply with the requirements of the NAIC Financial Condition Examiners Handbook, provide the name, location and a complete explanation												
		1 Name(s)		2 Location(s)				Complet	3 te Expl	anatior	n(s)		
28.03	Have there b	een any changes, including name ch	nanges in the	custodian(s) identified in 28 01 durir	na th	ne current ve	ar?				Y	es[]	No [X
28.04		Ill and complete information relating t	•	custodian(s) luchtilicu in 20.01 duni	iig tii	ic current ye	ui :				'	53[]	NO[A
		1 Old Custodian		2 New Custodian			Date	3 e of Change	е		4 Reaso	n	
28.05	Investment m	nanagement – Identify all investment	advisors inve	estment managers, hroker/dealers, in	nelue	dina individu:	als that	have the a	uthorit	tv			
20.00	to make inve	entity,	ity,										
			Name o	1 f Firm or Individual							2 Affiliatio	n	
	(i.e. 28.0598 For	those firms/individuals listed in the ta designated with a "U") manage mor firms/individuals unaffiliated with the total assets under management agg	e than 10% o reporting ent	f the reporting entity's invested asset ity (i.e. designated with a "U") listed i	ts? in the	e table for Q	·	,	es			es[]	No [X
28.06	For those firm	ns or individuals listed in the table for	•				provid	e the inforr	mation		•	00[]	140 [24
	for the table I	DEIOW.		2				3			4		5 estment
	Central F	Registration Depository Number		Name of Firm or Individual			Lega	l Entity Ide	ntifier ((LEI)	Registered With	Agr	agemen eement A) Filed
Does th	e reporting ent	ity have any diversified mutual funds	reported in S	Schedule D-Part 2 (diversified accord	ling t	to the Securi	ties an						
	-	n (SEC) in the Investment Company llowing schedule:	Act of 1940 [S	Section 5 (b) (1)])?						ı	Y	es[]	No [X
	1 CUSIP			2 Name of Mutual Fund							Book/Adju	3 sted Ca alue	ırrying
										\$			
	9 TOTAL									\$			
For eac	h mutual fund	listed in the table above, complete th	e following so	chedule:					3			4	
	1	Name of Mutual Fund		Name of Significant Ho		g		Amount of Book/Ad Value A	of Mutu djusted ttributa	Carryi ble to t	ng the		luotion
		(from above table)		of the Mutual Fund	a			\$	Holdin	9	Da	te of Va	luation
Provide	the following in	nformation for all short-term and long	g-term bonds		stitut	te amortized			nt value	e for fai			
				1			2	2			; cess of State alue (-), or F		
				Statement (Admitted) Value			Fair \	/alue		Vě	Staten		le over
30.1	Bonds				0	\$			0	\$			0
30.2	Preferred S Totals	Stocks		,	0	\$			0	\$			0
-		or methods utilized in determining the	e fair values:	1 4	•	1 4				1 4			
		security is a MMF and the custodian											
		calculate fair value determined by a b		•			ootroni	•			Y	es[X]	No [
		s yes, does the reporting entity have custodians used as a pricing source		broker's or custodian's pricing policy	(nai	ra copy or en	ectronii	j.			Υ	es[]	No [X
disclosu	ire of fair value	s no, describe the reporting entity's p for Schedule D: security is a MMF and the custodian		, ,	r pur	poses of							
	•	irements of the Purposes and Proce			ffice	been followe	ed?				Υ	es[X]	No [
If no, lis	t exceptions:												
By self- a.		SI securities, the reporting entity is ce on necessary to permit a full credit and le.						E or PL se	curity				
b. c.		gor is current on all contracted intere has an actual expectation of ultimate											
		y self-designated 5GI securities?	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			1.01.01					Y	es[]	No [X
By self-o		GI securities, the reporting entity is own. GI securities, the reporting entity is consistent of the security of the securities.		ollowing elements of each self-design	nate	ed PLGI secu	rity:						
a. b.	,	was purchased prior to January 1, 20 g entity is holding capital commensur		IAIC Designation reported for the sec	curity	y.							
C.	The NAIC De	esignation was derived from the cred current private letter rating held by the	it rating assig	ned by an NAIC CRP in its legal cap	acity	, , as an NRSF	RO whi	ch is					
d.		g entity is not permitted to share this		•	•	. 32.000							

Yes[] No[X]

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

- 35. By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self-designated FE fund:
 - a. The shares were purchased prior to January 1, 2019.
 - b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
 - c. The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019.
 - d. The fund only or predominantly holds bonds in its portfolio.
 - e. The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO.
 - The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed.

	The public distanting(s) that almost designed by all the orall had not appeal.		
	Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria?	Ye	s[] No[X]
	OTHER		
36.1	Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any?	\$	0
36.2	List the name of the organization and the amount paid if any such payment represented 25% or more of the total payments to trade associations, service organizations and statistical or rating bureaus during the period covered by this statement.		
	1		2
	Name	An	nount Paid
		\$	
37.1	Amount of payments for legal expenses, if any?	\$	0
37.2	List the name of the firm and the amount paid if any such payment represented 25% or more of the total payments for legal expenses during the period covered by this statement.		
	1		2
	Name	An	nount Paid
		\$	
38.1	Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments of government, if any?	\$	0
38.2	List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment expenditures in connection with matters before legislative bodies, officers or departments of government during the period covered by this statement.		
	1		2
	Name	An	nount Paid
		\$	

GENERAL INTERROGATORIES

PART 2 - PROPERTY & CASUALTY INTERROGATORIES

1.1		e reporting entity have any direct Medicare Supplement Insurance in fo	orce?		Yes []	No [X]
1.2	If yes, i	ndicate premium earned on U.S. business only.		\$		0
1.3	What p	ortion of Item (1.2) is not reported on the Medicare Supplement Insurance	ce Experience Exhibit?	\$		0
	1.31	Reason for excluding:	·	<u> </u>		
		Ç				
1.4	Indicat	amount of earned premium attributable to Canadian and/or Other Alier	n not included in Item (1.2) above.	\$		0
1.5	Indicat	e total incurred claims on all Medicare Supplement insurance.		\$		0
1.6		ral policies:		<u> </u>		
1.0		urrent three years:				
				Φ.		^
	1.61	Total premium earned		<u>\$</u>		0
	1.62	Total incurred claims		\$		0
	1.63	Number of covered lives				0
	All yea	s prior to most current three years:				
	1.64	Total premium earned		\$		0
	1.65	Total incurred claims		<u>+</u>		0
				Ψ		
	1.66	Number of covered lives				0
1.7	Group	policies:				
	Most c	irrent three years:				
	1.71	Total premium earned		\$		0
	1.72	Total incurred claims		\$		0
	1.73	Number of covered lives		<u></u>		0
	دور ال	s prior to most current three years:				
	1.74			¢		0
		Total premium earned		<u>\$</u>		
	1.75	Total incurred claims		\$		0
	1.76	Number of covered lives		_		0
2.	Health	Test:				
			1	2		
			Current Year	Prior `	r ear	
	2.1	Premium Numerator	\$ 0	\$	0	
	2.2	Premium Denominator	\$ 0	\$	0	
	2.3	Premium Ratio (2.1/2.2)	0.0%	· ·	0.0%	
	2.4	Reserve Numerator	\$ 0	¢	0	
			<u>'</u>	<u>Φ</u>	-	
	2.5	Reserve Denominator	\$ 0	\$	0	
	2.6	Reserve Ratio (2.4/2.5)	0.0%		0.0%	
3.1	Does to	e reporting entity issue both participating and non-participating policies?	?		Yes[]	No [X]
3.2	If yes,	tate the amount of calendar year premiums written on:				
	3.21	Participating policies			\$	0
	3.22	Non-participating policies			\$	0
,		· · · · · · · · · · · · · · · · · · ·	NI V		Ψ	
4.		UTUAL REPORTING ENTITIES AND RECIPROCAL EXCHANGES ON	NLT.			
	4.1	Does the reporting entity issue assessable policies?			Yes []	
	4.2	Does the reporting entity issue non-assessable policies?			Yes[]	
	4.3	If assessable policies are issued, what is the extent of the contingent li	liability of the policyholders?			%
	4.4	Total amount of assessments paid or ordered to be paid during the ye	ear on deposit notes or contingent premiums.		\$	0
5.	FOR R	ECIPROCAL EXCHANGES ONLY:				
	5.1	Does the exchange appoint local agents?			Yes[]] No[]
	5.2	If yes, is the commission paid:				
	0.2	5.21 Out of Attorney's-in-fact compensation			Yes[] No[]	N/A []
		5.22 As a direct expense of the exchange				
	5 0		- Aller Alleres 's feetO		Yes [] No []	N/A []
	5.3	What expenses of the exchange are not paid out of the compensation	n of the Attorney-in-fact?			
	E 1	Lies any Atterney in fact componentian continuent on fulfillment of co	rtain conditions, bean deformed?		Van I 1	l Nat 1
	5.4	Has any Attorney-in-fact compensation, contingent on fulfillment of cer	ertain conditions, been defened?		Yes[]] No[]
	5.5	If yes, give full information:				
C 4	\		- lane :- the account of a set of the other had a consider a consideration of the other had a consi			
6.1		rovision has this reporting entity made to protect itself from an excessive t issued without limit of loss?	e loss in the event of a catastrophe under a workers compe	ensation		
		s a 2017 formed company - No business written in 2019.				
6.2		e the method used to estimate this reporting entity's probable maximum	n insurance loss, and identify the type of insured exposures	s comprising		
0.2		bable maximum loss, the locations of concentrations of those exposure				
	softwa	e models), if any, used in the estimation process:	,			
	<u>RQRI i</u>	s a 2017 formed company - No business written in 2019.				
6.3		rovision has this reporting entity made (such as catastrophic reinsurance		rom the types		
		ncentrations of insured exposures comprising its probable maximum pro	operty insurance loss?			
		s a 2017 formed company - No business written in 2019.				
6.4		e reporting entity carry catastrophe reinsurance protection for at least of	ne reinstatement, in an amount sufficient to cover its estimate	ated	V== [1	Natvi
٠.	•	e maximum loss attributable to a single loss event or occurrence?	Attache annual amount the contraction of	ta badee 9	Yes[]	No [X]
6.5	If no, d	escribe any arrangements or mechanisms employed by the reporting en re to unreinsured catastrophic loss:	ntity to supplement its catastrophe reinsurance program or	to nedge its		
		s a 2017 formed company - No business written in 2019.				
7.1		reporting entity reinsured any risk with any other entity under a quota s	share reinsurance contract that includes a provision that wo	ould		
		reinsurer's losses below the stated quota share percentage (e.g., a dec				
	any sin	illar provisions)?			Yes []	No [X]

GENERAL INTERROGATORIES

PART 2 - PROPERTY & CASUALTY INTERROGATORIES

7.2	If yes,	indicate the number of reinsurance contracts containing such provisions.			0
7.3	If yes,	does the amount of reinsurance credit taken reflect the reduction in quota share coverage caused by any applicable limiting provision(s)?		Yes []	No []
8.1		is reporting entity reinsured any risk with any other entity and agreed to release such entity from liability, in whole or in part, from any loss		V 1 1	N. IVI
8.2		ay occur on this risk, or portion thereof, reinsured? give full information		Yes[]	No [X]
9.1	which surplus than 5	e reporting entity ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates) for during the period covered by the statement: (i) it recorded a positive or negative underwriting result greater than 5% of prior year-end is as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater of prior year-end surplus as regards policyholders; (ii) it accounted for that contract as reinsurance and not as a deposit; and (iii) the ct(s) contain one or more of the following features or other features that would have similar results:			
	(a)	A contract term longer than two years and the contract is noncancellable by the reporting entity during the contract term;			
	(b)	A limited or conditional cancellation provision under which cancellation triggers an obligation by the reporting entity, or an affiliate of			
	(c)	the reporting entity, to enter into a new reinsurance contract with the reinsurer, or an affiliate of the reinsurer; Aggregate stop loss reinsurance coverage;			
	(d)	A unilateral right by either party (or both parties) to commute the reinsurance contract, whether conditional or not, except for such			
	(e)	provisions which are only triggered by a decline in the credit status of the other party; A provision permitting reporting of losses, or payment of losses, less frequently than on a quarterly basis (unless there is no activity			
	(f)	during the period); or Payment schedule, accumulating retentions from multiple years or any features inherently designed to delay timing of the reimbursement		V	N. F.V.I
0.2	l loo th	to the ceding entity?		Yes[]	No [X]
9.2	with th result of and los arrang more u	e reporting entity during the period covered by the statement ceded any risk under any reinsurance contract (or under multiple contracts e same reinsurer or its affiliates), for which, during the period covered by the statement, it recorded a positive or negative underwriting greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss as expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; excluding cessions to approved pooling ements or to captive insurance companies that are directly or indirectly controlling, controlled by, or under common control with (i) one or inaffiliated policyholders of the reporting entity, or (ii) an association of which one or more unaffiliated policyholders of the reporting entity ember where:			
	(a)	The written premium ceded to the reinsurer by the reporting entity or its affiliates represents fifty percent (50%) or more of the entire direct and assumed premium written by the reinsurer based on its most recently available financial statement; or			
	(b)	Twenty-five percent (25%) or more of the written premium ceded to the reinsurer has been retroceded back to the reporting entity or its affiliates in a separate reinsurance contract.		Yes[]	No [X]
9.3	If yes t	o 9.1 or 9.2, please provide the following information in the Reinsurance Summary Supplemental Filing for General Interrogatory 9:		100[]	NO[X]
	(a)	The aggregate financial statement impact gross of all such ceded reinsurance contracts on the balance sheet and statement of income;			
	(b)	A summary of the reinsurance contract terms and indicate whether it applies to the contracts meeting the criteria in 9.1 or 9.2; and			
	(c)	A brief discussion of management's principle objectives in entering into the reinsurance contract including the economic purpose to be achieved	d .		
9.4	ceded	for transactions meeting the requirements of paragraph 37 of SSAP No. 62R, Property and Casualty Reinsurance, has the reporting entity any risk under any reinsurance contract (or multiple contracts with the same reinsurer or its affiliates) during the period covered by the all statement, and either:			
	(a)	Accounted for that contract as reinsurance (either prospective or retroactive) under statutory accounting principles ("SAP") and as a deposit under generally accepted accounting principles ("GAAP"); or			
9.5		Accounted for that contract as reinsurance under GAAP and as a deposit under SAP? o 9.4, explain in the Reinsurance Summary Supplemental Filing for General Interrogatory 9 (Section D) why the contract(s) is treated not of the following the following the supplemental Filing for GAAP and SAP.		Yes[]	No [X]
9.6		porting entity is exempt from the Reinsurance Attestation Supplement under one or more of the following criteria:			
0.0	(a)	The entity does not utilize reinsurance; or,		Yes [X]	No[]
	(b)	The entity only engages in a 100% quota share contract with an affiliate and the affiliated or lead company has filed an attestation supplement; or		Yes[]	No [X]
	(c)	The entity has no external cessions and only participates in an intercompany pool and the affiliated or lead company has filed an attestation supplement.		Yes[]	No [X]
10.	which	eporting entity has assumed risks from another entity, there should be charged on account of such reinsurances a reserve equal to that the original entity would have been required to charge had it retained the risks. Has this been done?	Yes[]	No[]	N/A [X]
11.1 11.2		e reporting entity guaranteed policies issued by any other entity and now in force? give full information		Yes[]	No [X]
12.1		eporting entity recorded accrued retrospective premiums on insurance contracts on Line 15.3 of the assets schedule, Page 2, state the it of corresponding liabilities recorded for:			
	12.11	Unpaid losses	\$		0
	12.12	Unpaid underwriting expenses (including loss adjustment expenses)	\$		0
12.2	Of the	amount on Line 15.3, Page 2, state the amount that is secured by letters of credit, collateral and other funds?	\$		0
12.3		eporting entity underwrites commercial insurance risks, such as workers' compensation, are premium notes or promissory notes ed from its insureds covering unpaid premiums and/or unpaid losses?	Yes[]	No[]	N/A [X]
12.4	If yes, 12.41	provide the range of interest rates charged under such notes during the period covered by this statement: From			%
	12.42	То			%
12.5	promis	ters of credit or collateral and other funds received from insureds being utilized by the reporting entity to secure premium notes or sory notes taken by a reporting entity, or to secure any of the reporting entity's reported direct unpaid loss reserves, including losses under loss deductible features of commercial policies?		Yes[]	No [X]
12.6	If yes,	state the amount thereof at December 31 of current year:			
	12.61	Letters of Credit	\$		0
		Collateral and other funds	\$		0
13.1	-	t net aggregate amount insured in any one risk (excluding workers' compensation):	\$		0
13.2	reinsta	any reinsurance contract considered in the calculation of this amount include an aggregate limit of recovery without also including a tement provision?		Yes[]	No [X]
13.3		he number of reinsurance contracts (excluding individual facultative risk certificates, but including facultative programs, automatic is or facultative obligatory contracts) considered in the calculation of the amount.			0

facilities or facultative obligatory contracts) considered in the calculation of the amount.

GENERAL INTERROGATORIES

PART 2 - PROPERTY & CASUALTY INTERROGATORIES

					٠٠.	21111 0 0711				0711011120				
14.1	Is the re	porting entity a cedant in a multip	ole cedant rein	surance c	ontra	ct?							Yes[]	No[X]
14.2	If yes, pl	ease describe the method of allo	cating and rec	cording rei	insur	ance among the co	edan	ts:						
14.3	If the an	swer to 14.1 is yes, are the meth	ods described	in item 14	1.2 eı	ntirely contained in	the	respective multiple	e ce	edant reinsurance con	itract	s?	Yes[]	No[]
14.4	If the an	swer to 14.3 is no, are all the me	thods describe	ed in 14.2	entir	ely contained in wr	ritten	agreements?					Yes[]	No []
14.5	If the an	swer to 14.4 is no, please explai	n:											
15.1	Has the	reporting entity guaranteed any	financed premi	ium accou	ınte?								Yes[]	No I Y 1
15.2		ve full information	illianoca premi	ium accor	11110:								103[]	NO[X]
	, 500, 9.													
16.1		e reporting entity write any warra	•										Yes[]	No[X]
	If yes, di	sclose the following information	for each of the	following	type	-	rage							
			1			2		3		4		5		
			Direct L Incur			Direct Losses Unpaid		Direct Written Premium		Direct Premium Unearned		Direct Premium Earned		
	16.11	Home	\$	0	\$	0	\$	0) :	\$ 0	\$	0		
	16.12	Products	\$	0	\$	0	\$	0) :	\$ 0	\$	0		
	16.13	Automobile	\$	0	\$	0	\$	0) :	\$ 0	\$	0		
	16.14	Other*	\$	0	\$	0	\$	0) :	\$ 0	\$	0		
	* Discl	ose type of coverage:												
17.1		e reporting entity include amount thorized reinsurance?	s recoverable	on unauth	orize	d reinsurance in S	Sche	dule F-Part 3 that i	is e	xempt from the statute	ory p	rovision	Yes[]	No [X]
		but not reported losses on contra for unauthorized reinsurance. F						ntly renewed are	exe	mpt from the statutory	y			
	17.11	Gross amount of unauthorize	d reinsurance i	n Schedu	le F-	Part 3 exempt from	n the	statutory provision	n fo	r unauthorized reinsu	ranc	e <u>\$</u>		0
	17.12	Unfunded portion of Interroga	tory 17.11									\$		0
	17.13	Paid losses and loss adjustm	ent expenses p	ortion of	Interr	ogatory 17.11						\$		0
	17.14	Case reserves portion of Inter	rogatory 17.11									\$		0
	17.15	Incurred but not reported port	ion of Interroga	atory 17.1	1							\$		0
	17.16	Unearned premium portion of	Interrogatory	17.11								\$		0
	17.17	Contingent commission portion	n of Interrogat	ory 17.11								\$		0
18.1	Do you a	act as a custodian for health savi	ngs accounts?)									Yes[]	No[X]
18.2	If yes, p	ease provide the amount of cus	odial funds he	ld as of th	e rep	orting date.						\$		0
18.3	Do you a	act as an administrator for health	savings accou	unts?									Yes[]	No[X]
18.4		ease provide the balance of the										\$		0
19.	Is the re	porting entity licensed or charted	, registered, qu	ualified, el	ligible	e, or writing busine	ss in	at least 2 states?					Yes[]	No[X]

If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity?

Yes [] No [X]

FIVE-YEAR HISTORICAL DATA

Show amounts in whole dollars only, no cents; show percentages to one decimal place, i.e. 17.6.

Snow amounts in whole dollars only, no cents; sn	1	2	3	4	5
	2019	2018	2017	2016	2015
Gross Premiums Written (Page 8, Part 1B, Cols. 1, 2 & 3)					
1. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)					
2. Property lines (Lines 1, 2, 9, 12, 21 & 26)					
3. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)					
4. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)					
5. Nonproportional reinsurance lines (Lines 31, 32 & 33)					
6. Total (Line 35)			0		0
Net Premiums Written (Page 8, Part 1B, Col. 6)					
7. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)					
8. Property lines (Lines 1, 2, 9, 12, 21 & 26)					
9. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)					
10. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)					
11. Nonproportional reinsurance lines (Lines 31, 32 & 33)					
12. Total (Line 35)		0			0
Statement of Income (Page 4)					0
13. Net underwriting gain (loss) (Line 8)	(10)	(10)			
5 , ,, ,	·	•			
15. Total other income (Line 15)					
16. Dividends to policyholders (Line 17)					
17. Federal and foreign income taxes incurred (Line 19)					
18. Net income (Line 20)	13,335	15,651	400	0	0
Balance Sheet Lines (Pages 2 and 3)					
19. Total admitted assets excluding protected cell business (Page 2, Line 26, Col. 3)	3,032,968	3,020,070	3,000,500		
20. Premiums and considerations (Page 2, Col. 3):					
20.1 In course of collection (Line 15.1)					
20.2 Deferred and not yet due (Line 15.2)					
20.3 Accrued retrospective premiums (Line 15.3)					
21. Total liabilities excluding protected cell business (Page 3, Line 26)	3,582	4,020	100 .		
22. Losses (Page 3, Line 1)					
23. Loss adjustment expenses (Page 3, Line 3)					
24. Unearned premiums (Page 3, Line 9)					
25. Capital paid up (Page 3, Lines 30 & 31)	1,000,000	1,000,000	1,000,000 .		
26. Surplus as regards policyholders (Page 3, Line 37)	3,029,386	3,016,051	3,000,400 .		
Cash Flow (Page 5)					
27. Net cash from operations (Line 11)	12,897	19,671	400 .		
Risk-Based Capital Analysis					
28. Total adjusted capital	3,029,386	3,016,051	3,000,400 .		
29. Authorized control level risk-based capital		5,191			
Percentage Distribution of Cash, Cash Equivalents and Invested Assets					
(Page 2, Col. 3) (Item divided by Page 2, Line 12, Col. 3) x 100.0					
30. Bonds (Line 1)					
31. Stocks (Lines 2.1 & 2.2)					
32. Mortgage loans on real estate (Lines 3.1 & 3.2)					
33. Real estate (Lines 4.1, 4.2 & 4.3)					
34. Cash, cash equivalents and short-term investments (Line 5)					
35. Contract loans (Line 6)					
36. Derivatives (Line 7)					
37. Other invested assets (Line 8)					
38 Receivables for securities (Line 9)					
39. Securities lending reinvested collateral assets (Line 10)					
40. Aggregate write-ins for invested assets (Line 11)					
41. Cash, cash equivalents and invested assets (Line 12)					
Investments in Parent, Subsidiaries and Affiliates			100.0		
42. Affiliated bonds (Sch. D, Summary, Line 12, Col. 1)					
43. Affiliated preferred stocks (Sch. D, Summary, Line 18, Col. 1)					
44. Affiliated common stocks (Sch. D, Summary, Line 16, Col. 1)					
44. Affiliated common stocks (Sch. D, Summary, Line 24, Col. 1)					
(subtotals included in Schedule DA, Verification, Column 5, Line 10)					
3.0					
47. All other affiliated					
48. Total of above lines 42 to 47					
49. Total investment in parent included in Lines 42 to 47 above					
50. Percentage of investments in parent, subsidiaries and affiliates to surplus					
as regards policyholders (Line 48 above divided by Page 3, Col. 1, Line 37 x 100.0)	0.0				

FIVE-YEAR HISTORICAL DATA

(Continued)

2019 2018 2017 2016 2015		(Contin	· · · · · · · · · · · · · · · · · · ·				Г
Capital and Surplus Accounts (Page 4)			1	2	3	4	5
S1 Net unrealized capital glans (losses) (Line 24)			2019	2018	2017	2016	2015
22 Dividends to stockholders (Line 35). 3.000,400 Cross Losses Paid (Page 9, Part 2, Cots. 1, 8.2)							
S3	51.						
Gross Losses Paid (Page 9, Part 2, Cols. 1 & 2) 54. Liability lines (Lines 11.4, 11.4). (f., 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4). 55. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27). 77. All other lines (Lines 16, 10, 13, 14, 15, 23, 24, 28, 29, 30, 8 34). 80. Nonproportional reinsurance lines (Lines 3, 1, 4, 5, 8, 22 & 27). 78. All other lines (Lines 16, 10, 13, 14, 15, 23, 24, 28, 29, 30, 8 34). 80. Nonproportional reinsurance lines (Lines 3, 13, 28, 33). 90. Total (Line 35). 90. 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	52.						
54. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 191, 19,2 & 19.3, 19.4)	53.	Change in surplus as regards policyholders for the year (Line 38)	13,335	15,651	3,000,400		
55. Property lines (Lines 1, 2, 9, 12, 21 & 26). 56. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27). 57. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 82, 93, 08, 34). 58. Nonproportional reinsurance lines (Lines 31, 32 & 33). 59. Total (Line 35). 60. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0		· - · · · · · · · · · · · · · · · · · ·					
56. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27). 57. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34). 58. Nonproportional reinsurance lines (Lines 31, 32 & 33). 59. Total (Line 35). Net Losses Paid (Page 9, Part 2, Co.L 4). 61. Liability lines (Lines 11, 11, 12, 16, 17, 1, 17-2, 17-3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4). 61. Property inso (Lines 11, 2), 12, 21 & 26). 62. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27). 63. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34) 64. Nonproportional reinsurance lines (Lines 31, 32 & 33). 65. Total (Line 36). Operating Percentages (Page 4) (Item divided by Page 4, Line 11 x 100.0) 66. Premiums earned (Line 1). 61. Losses incurred (Line 1). 70. Net underwriting expenses incurred (Line 4). 70. Net underwriting expenses incurred (Line 4). 70. Net underwriting expenses incurred (Line 4). 70. Net underwriting expenses to net premiums written (Page 4, Lines 4 + 5 - 15 divided by Page 8, Part 18, Col. 6, Line 35 x 100.0). 71. Losses and loss expenses incurred (Line 1). 72. Losses and loss expenses incurred (Line 1). 73. Not runderwriting expenses to net premiums written (Page 4, Lines 4 + 5 - 15 divided by Page 8, Part 18, Col. 6, Line 35 x 100.0). 74. Development in estimated losses and loss expenses incurred to premiums earned (Page 4, Lines 2 + 3 divided by Page 4, Line 1 x 100.0). 75. Percent of development (\$000 omitted) 76. Development in estimated losses and loss expenses incurred prior to current year (Schedule P, Part 2-Summany, Line 12, Col. 11, x 100). 77. Percent of development of losses and loss expenses incurred to premiums curred to premiums curred to premiums curred to premium current to respond profived for each of divided by Page 4, Line 1 x 100.0). 76. Development in estimated losses and loss expenses incur	54.	,					
57. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34). 58. Nonproportional rainsurance lines (Lines 31, 32 & 33). 9 Total (Line 35). Net Losses Paid (Page 9, Part 2, Col. 4) 60. Liability lines (Lines 11, 11, 2, 16, 17, 1, 172, 173, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4). 61. Property lines (Lines 12, 2, 9, 12, 21 & 26). 62. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27). 63. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34). 64. Nonproportional rainsurance lines (Lines 3, 32 & 33). 65. Total (Line 35). 60. Operating Percentages (Page 4) (Item divided by Page 4, Line 11 x 100.0 67. Losses incurred (Line 1). 68. Loss expenses incurred (Line 2). 69. Other underwriting expenses to net premiums written (Page 4, Lines 4 + 5 - 15 divided by Page 8, Part 18, Col. 6, Line 35 x 100.0). 70. Not underwriting expenses to net premiums written (Page 4, Lines 4 + 5 - 15 divided by Page 8, Part 18, Col. 6, Line 35 x 100.0). 71. Losses and loss expenses incurred by Page 4, Line 1 x 100.0). 72. Losses and loss expenses incurred prior to currently expenses to net premiums written to policyholders' surplus (Page 8, Part 18, Col. 6, Line 35, divided by Page 9, 2, Line 1 x 100.0). 73. Not premiums written to policyholders' surplus (Page 8, Line 12, Col. 1 x 100.0). 74. Development in estimated losses and loss expenses incurred prior to current year (Schedule P, Part 2-Summary, Line 12, Col. 1 x 100.0). 75. Percent of development (16000 omitted) 76. Development in estimated losses and loss expenses incurred to reported policyholders' surplus of prior year-end (Line 74 above divided by Page 4, Line 12, Col. 1 x 100.0). 76. Development in estimated losses and loss expenses incurred to reported policyholders' surplus of prior year-end (Line 74 above divided by Page 4, Line 12, Col. 1 x 100.0). 77. Percent of development of losses and loss expenses incurred to reported policyholders' surplus of prior year-end (Line 74 above divided by Page 4, Line 12, Col. 12). 77	55.	Property lines (Lines 1, 2, 9, 12, 21 & 26)					
58. Nonproportional reinsurance lines (Lines 31, 32 & 33). 59. Total (Line 35). 00. 00. 00. Net Losses Paid (Page 9, Part 2, Col. 4). 60. Liability lines (Lines 11, 11, 12, 16, 171, 172, 173, 181, 182, 191, 192 & 193, 19.4). 61. Property lines (Lines 1, 2, 9, 12, 21 & 26). 62. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27). 63. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34) 64. Nonproportional reinsurance lines (Lines 31, 32 & 33) 65. Total (Line 35). Operating Percentages (Page 4) (Illend vilided by Page 4, Line 11 x 100.0) 66. Premiums earned (Line 1) 100.0 100.	56.	Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)					
59. Total (Line 35)	57.	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)					
Net Losses Paid (Page 9, Part 2, Col. 4) 60. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4). 61. Property lines (Lines 12, 9, 12, 21 & 26). 62. Property and liability combined lines (Lines 3.4, 5.8, 22 & 27) 63. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34) 64. Nonproportional reinsurance lines (Lines 31, 32 & 33) 65. Total (Line 35) 69. Operating Percentagess (Page 4) (Item divided by Page 4, Line 1) x 100.0 66. Premiums earned (Line 1) 61. Losses incurred (Line 1) 62. Losse sincurred (Line 2) 63. Under underwriting expenses incurred (Line 4) 64. Nonproportional reinsurance lines (Line 3.6) 65. Other underwriting expenses incurred (Line 4) 67. Net underwriting garn (loss) (Line 8) 68. Under very line (Jose) (Line 8) 69. Other underwriting expenses incurred (Line 4) 70. Net underwriting appenses to net premiums written (Page 4, Lines 4 + 5 - 15 divided by Page 8, Part 18, Col. 6, Line 35 x 100.0). 71. Losses and loss expenses incurred to premiums earned (Page 4, Lines 4 + 5 - 15 divided by Page 3, Line 17, Col. 1 x 100.0). 72. Losses and loss expenses incurred to premiums earned (Page 4, Lines 4 + 5 - 15 divided by Page 3, Line 17, Col. 1 x 100.0). 73. Net premiums written to policyholders' surplus (Page 8, Part 18, Col. 6, Line 35, divided by Page 4, Line 1 x 100.0). 74. Development in estimated losses and loss expenses incurred prior to current year (Schedule P, Part 2-Summary, Line 12, Col. 11). 75. Percent of development of losses and loss expenses incurred 2 years before the current year and prior year (Schedule P, Part 2-Summary, Line 12, Col. 12). 76. Development in estimated losses and loss expenses incurred to preinty of the current year and prior year (Schedule P, Part 2-Summary, Line 12, Col. 12). 77. Parcent of development of losses and loss expenses incurred to reported policyholders' surplus of reported policyholders' surplus of reported policyholders' surplus of second prior-year end (Line 7							
60. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4). 61. Property lines (Lines 11.2, 19.12, 21 & 26). 62. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27). 83. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34). 64. Nonproportional reinsurance lines (Lines 31, 32 & 33). 65. Total (Line 35). Operating Percentages (Page 4) (Iten divide by Page 4, Line 1) x 100.0 66. Premiums earned (Line 1)	59.	Total (Line 35)	0	0	0	0	0
61. Properly lines (Lines 1, 2, 9, 12, 21 & 26). 62. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27). 63. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34). 64. Nonproportional reinsurance lines (Lines 31, 32 & 33). 65. Total (Line 35)		Net Losses Paid (Page 9, Part 2, Col. 4)					
62. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	60.	Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)					
63. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34) 64. Nonproportional reinsurance lines (Lines 31, 32 & 33) 65. Total (Line 35)	61.	Property lines (Lines 1, 2, 9, 12, 21 & 26)					
64. Nonproportional reinsurance lines (Lines 31, 32 & 33)	62.	Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)					
65. Total (Line 35)	63.	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)					
Operating Percentages (Page 4) (Item divided by Page 4, Line 1) x 100.0 66. Premiums earned (Line 1)	64.	Nonproportional reinsurance lines (Lines 31, 32 & 33)					
(Item divided by Page 4, Line 1) x 100.0 66. Premiums earned (Line 1)	65.	Total (Line 35)	0	0	0	0	0
67. Losses incurred (Line 2) 68. Loss expenses incurred (Line 3) 69. Other underwriting expenses incurred (Line 4) 70. Net underwriting gain (loss) (Line 8) Other Percentages 71. Other underwriting expenses to net premiums written (Page 4, Lines 4 + 5 - 15 divided by Page 8, Part 1B, Col. 6, Line 35 x 100.0) 72. Losses and loss expenses incurred to premiums earned (Page 4, Lines 2 + 3 divided by Page 8, Part 1B, Col. 6, Line 35, divided by Page 8, Part 1B, Col. 6, Line 35, divided by Page 8, Part 1B, Col. 6, Line 35, divided by Page 3, Line 1 x 100.0) 73. Net premiums written to policyholders' surplus (Page 8, Part 1B, Col. 6, Line 35, divided by Page 3, Line 37, Col. 1 x 100.0) One Year Loss Development (\$000 omitted) 74. Development in estimated losses and loss expenses incurred to policyholders' surplus of prior year-end (Line 74 above divided by Page 4, Line 21, Col. 1 x 100) Two Year Loss Development (\$000 omitted) 76. Development in estimated losses and loss expenses incurred 2 years before the current year and prior year (Schedule P, Part 2-Summary, Line 12, Col. 12) 77. Percent of development of losses and loss expenses incurred 2 years before the current year and prior year (Schedule P, Part 2-Summary, Line 12, Col. 12) 77. Percent of development of losses and loss expenses incurred to reported policyholders' surplus of second prior-year end							
68. Loss expenses incurred (Line 3). 69. Other underwriting expenses incurred (Line 4)	66.	Premiums earned (Line 1)	100.0	100.0	100.0	100.0	100.0
69. Other underwriting expenses incurred (Line 4)	67.	Losses incurred (Line 2)					
70. Net underwriting gain (loss) (Line 8) Other Percentages 71. Other underwriting expenses to net premiums written (Page 4, Lines 4 + 5 - 15 divided by Page 8, Part 1B, Col. 6, Line 35 x 100.0) 72. Losses and loss expenses incurred to premiums earned (Page 4, Lines 2 + 3 divided by Page 4, Line 1 x 100.0) 73. Net premiums written to policyholders' surplus (Page 8, Part 1B, Col. 6, Line 35, divided by Page 3, Line 37, Col. 1 x 100.0) One Year Loss Development (\$000 omitted) 74. Development in estimated losses and loss expenses incurred prior to current year (Schedule P, Part 2-Summary, Line 12, Col. 11) 75. Percent of development of losses and loss expenses incurred to policyholders' surplus of prior year-end (Line 74 above divided by Page 4, Line 21, Col. 1 x 100) Two Year Loss Development (\$000 omitted) 76. Development in estimated losses and loss expenses incurred 2 years before the current year and prior year (Schedule P, Part 2-Summary, Line 12, Col. 12) 77. Percent of development of losses and loss expenses incurred to reported policyholders' surplus of second prior-year end	68.	Loss expenses incurred (Line 3)					
Other Percentages 71. Other underwriting expenses to net premiums written (Page 4, Lines 4 + 5 - 15 divided by Page 8, Part 1B, Col. 6, Line 35 x 100.0)	69.	Other underwriting expenses incurred (Line 4)					
71. Other underwriting expenses to net premiums written (Page 4, Lines 4 + 5 - 15 divided by Page 8, Part 1B, Col. 6, Line 35 x 100.0)	70.	Net underwriting gain (loss) (Line 8)					
divided by Page 8, Part 1B, Col. 6, Line 35 x 100.0)		Other Percentages					
(Page 4, Lines 2 + 3 divided by Page 4, Line 1 x 100.0)	71.						
Col. 6, Line 35, divided by Page 3, Line 37, Col. 1 x 100.0)	72.						
74. Development in estimated losses and loss expenses incurred prior to current year (Schedule P, Part 2-Summary, Line 12, Col. 11)	73.						
to current year (Schedule P, Part 2-Summary, Line 12, Col. 11)		One Year Loss Development (\$000 omitted)					
of prior year-end (Line 74 above divided by Page 4, Line 21, Col. 1 x 100)	74.						
76. Development in estimated losses and loss expenses incurred 2 years before the current year and prior year (Schedule P, Part 2-Summary, Line 12, Col. 12)	75.						
current year and prior year (Schedule P, Part 2-Summary, Line 12, Col. 12)		Two Year Loss Development (\$000 omitted)					
77. Percent of development of losses and loss expenses incurred to reported policyholders' surplus of second prior-year end	76.						
Lillo 10 above divided by 1 age 4, Lillo 21, Ool. 2 x 100.0/	77.	Percent of development of losses and loss expenses incurred to reported policyholders' surplus of second prior-year end					

reported policyholders' surplus of second prior-year end						
(Line 76 above divided by Page 4, Line 21, Col. 2 x 100.0)						
If a party to a merger, have the two most recent years of this exhibit been restated due to a merger	r in compliance with	the disclosure requi	rements of			
SSAP No. 3, Accounting Changes and Correction of Errors?				Y	'es[]	No [
If no, please explain:						

Sch. P - Pt. 1 NONE

Sch. P - Pt. 2 NONE

Sch. P - Pt. 3 NONE

Sch. P - Pt. 4 NONE

Annual Statement for the year 2019 of the R&Q RI Insurance Company SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

					States and					
		Active Status	Membership Fees Le	ncluding Policy and less Return Premiums Policies Not Taken 3 Direct Premiums	Dividends Paid or Credited to Policyholders on Direct	5 Direct Losses Paid (Deducting	6 Direct Losses	7 Direct Losses	8 Finance and Service Charges not Included	9 Direct Premiums Written for Federal Purchasing Groups
	States, Etc.	(a)	Written	Earned	Business	Salvage)	Incurred	Unpaid	in Premiums	(Incl. in Col. 2)
1.	AlabamaAL	N								
2.	AlaskaAK	N								
3.	ArizonaAZ	N								
4.	ArkansasAR									
5.	CaliforniaCA									
6. 7.	ColoradoCO ConnecticutCT	N								
	DelawareDE	N								
	District of ColumbiaDC									
10.	FloridaFL									
11.	GeorgiaGA									
12.	HawaiiHl									
13.	ldahoID	N								
14.	IllinoisIL	N								
15.	IndianaIN									
16.	lowaIA	N								
17.	KansasKS	N								
18. 19.	KentuckyKY LouisianaLA	N								
	MaineME	N								
	MarylandMD									
	MassachusettsMA									
	MichiganMI									
24.	MinnesotaMN									
	MississippiMS	N								
	MissouriMO									
	MontanaMT	N								
	NebraskaNE NevadaNV	N								
	New HampshireNH									
	New JerseyNJ									
	New MexicoNM									
	New YorkNY	N								
	North CarolinaNC									
	North DakotaND	N								
36.	OhioOH	N								
37.	OklahomaOK									
	OregonOR									
	PennsylvaniaPA Rhode IslandRI									
	South CarolinaSC									
	South DakotaSD									
43.	TennesseeTN									
44.	TexasTX									
45.	UtahUT	N								
	VermontVT									
	VirginiaVA									
	WashingtonWA									
	West VirginiaWV WisconsinWI									
	WyomingWY									
	American SamoaAS									
	GuamGU									
54.	Puerto RicoPR	N								
55.	US Virgin IslandsVI									
	Northern Mariana IslandsMP	N								
	CanadaCAN			-						
	Aggregate Other AlienOT	XXX	0			0	0		0	
59.	Totals	XXX	0	0		0	0	0	0	0
58በበ1		XXX		DETA	AILS OF WRITE-IN	15				
		XXX								
		XXX								
	Summary of remaining write-ins for									
E0000	Line 58 from overflow page	XXX	0	0	0	0	0	0	0	0
58999.	Totals (Lines 58001 thru 58003+	VVV				0	0	,		0
(a)	Line 58998) (Line 58 above) Active Status Counts:	XXX	0	0	<u> U</u>	0	U	I∪	U	U
١,,	nsed or Chartered - Licensed insuran	ice carrier o	or domiciled RRG	1	_	R - Registered - No	on-domiciled RRGs.			0
	ble - Reporting entities eligible or app	proved to w	rite surplus lines in the st	tate	-	Q - Qualified - Qua	lified or accredited r	einsurer		0
D D	(other than their state of domicile - S				_	N - None of the ab	ove - Not allowed to	write business in th	e state	56
ח - חסת	nestic Surplus Lines Insurer (DSLI) - surplus lines in the state of domicile									
(b)	Explanation of Basis of Allocation N/A				-					

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SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART

Company Name	Holding	Reg. No.	Registered Office	FCA NAIC#	State Code
Randall & Quilter Investment Holdings Ltd.		47341	Clarendon House, 2 Church Street, Hamilton, HM11, Bermuda		
RQLM Limited	100%	48020	Crawford House, 50 Cedar Ave, Hamilton HM11, Bermuda		
FNF Title Company Limited	100%	C 55253	Development House, St. Anne Street, Floriana, FRN 9010, Malta		
R&Q Delta Company Limited	100%	10344871	71 Fenchurch Street, London, EC3M 4BS, England		
R&Q Ireland Company Limited by Guarantee	100%	10272	10 Earlsfort Terrace, Dublin 2, D02 T380 Ireland		
R&Q Ireland Claims Services Limited	66.6%	505967	10 Earlsfort Terrace, Dublin 2, D02 T380 Ireland		
R&Q Gamma Company Limited	100%	1335239	71 Fenchurch Street, London EC3M 4BS, England	202793	
RQIH Limited	100%	3671097	71 Fenchurch Street, London, EC3M 4BS, England		
R&Q Oast Limited	100%	3593065	71 Fenchurch Street, London, EC3M 4BS, England		
Randall & Quilter PS Holdings Inc	100%	83-1770410	c/o Cogency Global Inc, 850 New Burton Road, Suite 201, City of Dover, County of Kent DE 19904		
Randall & Quilter Canada Holdings Limited	100%	753780-8	40 King St West, Suite 5800, PO Box 1011, Toronto ON, M5H 3S1, Canada		
R&Q Risk Services Canada Limited	100%	753781-6	40 King St West, Suite 5800, PO Box 1011, Toronto ON, M5H 3S1, Canada		
Randall & Quilter II Holdings Limited	100%	7659577	71 Fenchurch Street, London, EC3M 4BS, England		
R&Q Re (Bermuda) Limited	100%	41047	Clarendon House, 2 Church St, Hamilton. HM11 Bermuda		
R&Q Bermuda (SAC) Limited	100%	30104	Clarendon House, 2 Church St, Hamilton. HM11 Bermuda		
Berda Developments Limited	100%	1848	Clarendon House, 2 Church Street, Hamilton, HM11, Bermuda		
Distinguished Re Ltd	100%	10875	First Floor, Trident House, Lower Broad Street, Bridgetown, Barbados		
R&Q Capital No. 1 Limited	95%	7382921	71 Fenchurch Street, London, EC3M 4BS, England		
R&Q Capital No.6 Limited	100%	7066541	71 Fenchurch Street, London, EC3M 4BS, England		
R&Q Capital No.7 Limited	100%	7066562	71 Fenchurch Street, London, EC3M 4BS, England		
R&Q Reinsurance Company (UK) Limited	100%	1315641	71 Fenchurch Street, London, EC3M 4BS, England	202188	
La Licorne Compagnie de Reassurances SA	100%	316 695 469	26-26 Rue des Londres, 75009 Paris, France		
R&Q Epsilon Insurance Company SE	100%	SE000120	71 Fenchurch Street, London, EC3M 4BS		
Capstan Insurance Company Limited	100%	14527	Maison Trinity, Trinity Square, St Peter Port, Guernsey, GY1 4AT	34889	
Hickson Insurance Limited	100%	7256	3rd Floor, St. James's Chambers, 64a/65 Athol Street, Douglas Isle of Man IM1 6JE		
R&Q Malta Holdings Limited	100%	C59458	3 rd Floor, Development House, St Anne Street, Floriana, FRN 9010, Malta		
Accredited Insurance (Europe) Limited	100%	C59505	3 rd Floor, Development House, St Anne Street, Floriana, FRN 9010, Malta		
R&Q Eta Company Limited	100%	5008295	71 Fenchurch Street, London, EC3M 4BS		
R&Q Insurance (Europe) Limited	100%	C78902	3rd Floor, Development House, St Anne Street, Floriana, FRN 9010, Malta		
R & Q Cyprus Ltd	100%	HE 64173	205 Loulloupis Court, 5th Floor, Flat/Office 501, 3036 Linassol, Cyprus		
R&Q Alpha Company SE	100%	SE11	171 Old Bakery Street, Valletta, VLT 1455, Malta		
R&Q Beta Company SE	100%	SE12	171 Old Bakery Street, Valletta, VLT 1455, Malta		
Sandell Holdings Ltd	100%	49850	Canon's Court, 22 Victoria Street, Hamilton, HM12 Bermuda		
Sandell Re Ltd	100%	49851	Canon's Court, 22 Victoria Street, Hamilton, HM12 Bermuda		
Randall & Quilter IS Holdings Limited	100%	7659581	71 Fenchurch Street, London, EC3M 4BS, England		
R&Quiem Financial Services Limited	100%	2192234	71 Fenchurch Street, London, EC3M 4BS, England	134699	
R&Q Central Services Limited	100%	4179375	71 Fenchurch Street, London, EC3M 4BS, England		
R&Q Insurance Services Limited	100%	1097308	71 Fenchurch Street, London, EC3M 4BS, England	314329	
Callidus Solutions Limited	51%	9939234	54 Fenchurch Street, London, EC3M 3JY		
Randall & Quilter America Holdings Inc.	100%	13-3496014	c/o Cogency, 615 South DuPont Highway, Dover DE 19901, USA		DE
Accredited Holding Corporation	100%	59-0868428	4798 New Broad Street, Suite 200, Orlando, FL 32814		FL
Accredited Surety and Casualty Company, Inc.	100%	59-1362150	4798 New Broad Street, Suite 200, Orlando, FL 32814	26379	FL

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART

Accredited Group Agency, Inc.	100%	59-3392908	4798 New Broad Street, Suite 200, Orlando, FL 32814		FL
Accredited Bond Agencies, Inc.	100%	59-3457839	4798 New Broad Street, Suite 200, Orlando, FL 32814		FL
Randall & Quilter Healthcare Holdings Inc.	100%	47-1219882	c/o Cogency, 615 South DuPont Highway, Dover DE 19901, USA		DE
R&Q Healthcare Interests LLC	100%	38-3934576	c/o Cogency, 615 South DuPont Highway, Dover DE 19901, USA		DE
R&Q Reinsurance Company	100%	23-1740414	Two Logan Square, Philadelphia, PA 19103	22705	PA
R&Q RI Insurance Company	100%	82-1212894	c/o Partridge, Snow & Hahn LLP, 40 Westminster Street, Suite 1100, Providence, RI 02903, USA	16206	RI
R&Q Quest PCC, LLC	100%	90-0897620	1333 H Street NW, Suite 820E, Washington DC, DC 20005, USA	RE132	DC
Transport Insurance Company	100%	75-0784127	1300 East 9 th Street, Cleveland, OH 44114	33014	ОН
ICDC, Ltd.	100%	52-1557469	961 Dorset Street, South Burlington, VT 05403, USA		VT
GLOBAL U.S. Holdings, Inc	100%	13-3907460	340 Madison Avenue, 19th Floor, New York, United States		NY
GLOBAL Reinsurance Corporation of America	100%	13-5009848	340 Madison Avenue, 19th Floor, New York, United States	21032	NY
Grafton US Holdings Inc.	80%	45-0886689	c/o Cogency, 615 South DuPont Highway, Dover DE 19901, USA		DE
LBL Acquisitions, LLC	100%	38-3932966	c/o Cogency, 615 South DuPont Highway, Dover DE 19901, USA		DE
Risk Transfer Underwriting Inc.	100%	45-0981421	330 Roberts Street, Suite 203, East Hartford, CT 06180-3654		CT
R&Q Services Holding Inc.	100%	45-3265690	c/o Cogency, 615 South DuPont Highway, Dover DE 19901, USA		DE
Excess and Treaty Management Corporation	100%	41-1568621	Two Logan Square, Suite 600, Philadelphia, PA 19103 USA		NY
Requiem America Inc.	100%	36-3293537	c/o Cogency, 615 South DuPont Highway, Dover DE 19901, USA		IL
Syndicated Services Company Inc.	100%	36-3786990	c/o Cogency, 615 South DuPont Highway, Dover DE 19901, USA		IL
R&Q Solutions LLC	100%	13-3978252	Two Logan Square, Suite 600, Philadelphia, PA 19103 USA		DE
RSI Solutions International Inc.	100%	13-4131334	Two Logan Square, Suite 600, Philadelphia, PA 19103 USA		PA
National Legacy Insurance Company	100%	83-4075549	Two Logan Square, Suite 600 , Philadelphia, PA 19103 USA	16660	OK
Randall & Quilter Captive Holdings Limited	100%	7650726	71 Fenchurch Street, London, EC3M 4BS, England		
R&Q Quest Management Services (Cayman) Limited	100%	27441	Lainston International Management (Cayman) Ltd., Governors Square, P O BOX 31298, Grand Cayman, KY1-1. Indies	206, Cayman Islands, Brit	tish West
R&Q Quest Insurance Limited	100%	48257	22 Canon's Court, 22 Victoria Street, Hamilton HM12, Bermuda		
R&Q Quest (SAC) Limited	100%	36230	Clarendon House, 2 Church Street, Hamilton, HM11, Bermuda		
R&Q Insurance Management (IOM) Limited	100%	127029C	3rd Floor, Development House, St Anne Street, Floriana, FRN 9010, Malta		
Pender Mutual insurance Company Limited	100%	107718C	3rd Floor, St. James's Chambers, 64a/65 Athol Street, Douglas Isle of Man IM1 6JE		
R&Q Insurance Management (Gibraltar) Limited	100%	58192	Suite 2B, Mansion House, 143 Main Street, GX11 1AA		
Randall & Quilter Underwriting Management Holdings Limited	100%	7504909	71 Fenchurch Street, London EC3M 4BS, England		
R&Q MGA Limited	100%	5337045	71 Fenchurch Street, London EC3M 4BS, England	440543	
Trilogy Managing General Agents Limited	80%	8397254	71 Fenchurch Street, London EC3M 4BS, England		
R&Q Commercial Risk Services Limited	100%	7313009	71 Fenchurch Street, London EC3M 4BS, England	530938	
R&Q Munro Services Company Limited	100%	3937013	71 Fenchurch Street, London EC3M 4BS, England		
R&Q Munro MA Limited	100%	8576587	71 Fenchurch Street, London EC3M 4BS, England		

2019 ALPHABETICAL INDEX -- PROPERTY & CASUALTY ANNUAL STATEMENT BLANK

		Cabadula D. Dart 211. Castion 4. Others Lightlith. Consumance	F0
Assets Cash Flow	5	Schedule P–Part 2H–Section 1–Other Liability–Occurrence Schedule P–Part 2H–Section 2–Other Liability–Claims–Made	58 58
Exhibit of Capital Gains (Losses)	12	Schedule P-Part 2I-Section 2-one: Elability-Claims-Indiade Schedule P-Part 2I-Spec. Prop. (Fire, Allied Lines, Inland Marine, Earthquake, Burglary, Theft)	59
Exhibit of Net Investment Income	12	Schedule P-Part 2J-Auto Physical Damage	59
Exhibit of Nonadmitted Assets	13	Schedule P–Part 2K–Fidelity, Surety	59
Exhibit of Premiums and Losses (State Page)	19	Schedule P–Part 2L–Other (Including Credit, Accident and Health)	59
Five-Year Historical Data	17	Schedule P–Part 2M–International	59
General Interrogatories	15	Schedule P–Part 2N–Reinsurance – Nonproportional Assumed Property	60
Jurat Page	1	Schedule P–Part 20–Reinsurance – Nonproportional Assumed Liability	60
Liabilities, Surplus and Other Funds	3	Schedule P–Part 2P–Reinsurance – Nonproportional Assumed Financial Lines	60
Notes To Financial Statements	14	Schedule P–Part 2R–Section 1–Products Liability–Occurrence	61
Overflow Page For Write-ins	100	Schedule P–Part 2R–Section 2–Products Liability–Claims-Made	61
Schedule A-Part 1	E01	Schedule P–Part 2S–Financial Guaranty/Mortgage Guaranty	61
Schedule A-Part 2	E02	Schedule P–Part 2T–Warranty	61
Schedule A-Part 3	E03	Schedule P–Part 3A–Homeowners/Farmowners	62
Schedule A-Verification Between Years	SI02	Schedule P-Part 3B-Private Passenger Auto Liability/Medical	62
Schedule B-Part 1	E04	Schedule P–Part 3C–Commercial Auto/Truck Liability/Medical	62
Schedule B-Part 2	E05	Schedule P-Part 3D-Workers' Compensation (Excluding Excess Workers Compensation)	62
Schedule B-Part 3	E06	Schedule P–Part 3E–Commercial Multiple Peril	62
Schedule B-Verification Between Years	SI02 E07	Schedule P-Part 3F-Section 1 -Medical Professional Liability-Occurrence	63 63
Schedule BA-Part 1 Schedule BA-Part 2	E08	Schedule P–Part 3F–Section 2–Medical Professional Liability–Claims-Made Schedule P–Part 3G–Special Liability (Ocean Marine, Aircraft (All Perils), Boiler & Machinery)	63
Schedule BA-Part 3	E09	Schedule P-Part 3H-Section 1-Other Liability-Occurrence	63
Schedule BA-Verification Between Years	SI03	Schedule P-Part 3H-Section 2-Other Liability-Claims-Made	63
Schedule D-Part 1	E10	Schedule P-Part 3I-Spec. Prop. (Fire, Allied Lines, Inland Marine, Earthquake, Burglary, Theft)	64
Schedule D–Part 1A–Section 1	SI05	Schedule P-Part 3J-Auto Physical Damage	64
Schedule D-Part 1A-Section 2	SI08	Schedule P-Part 3K-Fidelity/Surety	64
Schedule D-Part 2-Section 1	E11	Schedule P–Part 3L–Other (Including Credit, Accident and Health)	64
Schedule D-Part 2-Section 2	E12	Schedule P-Part 3M-International	64
Schedule D–Part 3	E13	Schedule P-Part 3N-Reinsurance – Nonproportional Assumed Property	65
Schedule D-Part 4	E14	Schedule P–Part 30–Reinsurance – Nonproportional Assumed Liability	65
Schedule D-Part 5	E15	Schedule P-Part 3P-Reinsurance - Nonproportional Assumed Financial Lines	65
Schedule D-Part 6-Section 1	E16	Schedule P–Part 3R–Section 1–Products Liability–Occurrence	66
Schedule D-Part 6-Section 2	E16	Schedule P–Part 3R–Section 2–Products Liability–Claims-Made	66
Schedule D-Summary By Country	SI04	Schedule P-Part 3S-Financial Guaranty/Mortgage Guaranty	66
Schedule D-Verification Between Years	SI03	Schedule P–Part 3T–Warranty	66
Schedule DA-Part 1	E17	Schedule P-Part 4A-Homeowners/Farmowners	67
Schedule DA-Verification Between Years	SI10	Schedule P–Part 4B–Private Passenger Auto Liability/Medical	67
Schedule DB-Part A-Section 1	E18	Schedule P–Part 4C–Commercial Auto/Truck Liability/Medical	67
Schedule DB-Part A-Section 2	E19	Schedule P–Part 4D–Workers' Compensation (Excluding Excess Workers Compensation)	67
Schedule DB-Part A-Verification Between Years	SI11	Schedule P–Part 4E–Commercial Multiple Peril	67
Schedule DB-Part B-Section 1	E20	Schedule P–Part 4F–Section 1–Medical Professional Liability–Occurrence	68
Schedule DB-Part B-Section 2	E21	Schedule P-Part 4F-Section 2-Medical Professional Liability-Claims-Made	68
Schedule DB-Part B-Verification Between Years	SI11	Schedule P–Part 4G–Special Liability (Ocean Marine, Aircraft (All Perils), Boiler & Machinery) Schedule P–Part 4H–Section 1–Other Liability–Occurrence	68 68
Schedule DB-Part C-Section 1 Schedule DB-Part C-Section 2	SI12 SI13	Schedule P-Part 4H-Section 1-Other Liability-Occurrence Schedule P-Part 4H-Section 2-Other Liability-Claims-Made	68
Schedule DB-Part D-Section 1	E22	Schedule P-Part 4I-Spec. Prop. (Fire, Allied Lines, Inland Marine, Earthquake, Burglary & Theft)	69
Schedule DB-Part D-Section 1 Schedule DB-Part D-Section 2	E23	Schedule P-Part 41-Auto Physical Damage	69
Schedule DB-Part E Schedule DB-Part E	E24	Schedule P-Part 4K-Fidelity/Surety	69
Schedule DB-Verification	SI14	Schedule P–Part 4L–Other (Including Credit, Accident and Health)	69
Schedule DL-Part 1	E25	Schedule P–Part 4M–International	69
Schedule DL-Part 2	E26	Schedule P-Part 4N-Reinsurance - Nonproportional Assumed Property	70
Schedule E-Part 1-Cash	E27	Schedule P–Part 40–Reinsurance – Nonproportional Assumed Liability	70
Schedule E-Part 2-Cash Equivalents	E28	Schedule P–Part 4P–Reinsurance – Nonproportional Assumed Financial Lines	70
Schedule E-Verification Between Years	SI15	Schedule P–Part 4R–Section 1–Products Liability–Occurrence	71
Schedule E-Part 3-Special Deposits	E29	Schedule P–Part 4R–Section 2–Products Liability–Claims-Made	71
Schedule F–Part 1	20	Schedule P-Part 4S-Financial Guaranty/Mortgage Guaranty	71
Schedule F-Part 2	21	Schedule P–Part 4T–Warranty	71
Schedule F–Part 3	22	Schedule P–Part 5A–Homeowners/Farmowners	72
Schedule F-Part 4	27	Schedule P–Part 5B–Private Passenger Auto Liability/Medical	73
Schedule F–Part 5	28	Schedule P–Part 5C–Commercial Auto/Truck Liability/Medical	74
Schedule F-Part 6	29	Schedule P–Part 5D–Workers' Compensation (Excluding Excess Workers Compensation)	75 70
Schedule H-Accident and Health Exhibit-Part 1	30	Schedule P-Part 5E-Commercial Multiple Peril	76
Schedule H-Part 2, Part 3 and Part 4	31	Schedule P-Part 5F-Medical Professional Liability-Claims-Made	78 77
Schedule H–Part 5–Health Claims Schedule P–Part 1–Summary	32 33	Schedule P–Part 5F–Medical Professional Liability–Occurrence Schedule P–Part 5H–Other Liability–Claims-Made	80
Schedule P-Part 1A-Homeowners/Farmowners	35	Schedule P-Part 5H-Other Liability-Occurrence	79
Schedule P-Part 1B-Private Passenger Auto Liability/Medical	36	Schedule P-Part 5R-Products Liability-Claims-Made	82
ů i			
Schedule P-Part 1C-Commercial Auto/Truck Liability/Medical	37		
Schedule P-Part 1C-Commercial Auto/Truck Liability/Medical Schedule P-Part 1D-Workers' Compensation (Excluding Excess Workers Compensation)	37 38	Schedule P–Part 5R–Products Liability–Occurrence	81 83
Schedule P-Part 1C-Commercial Auto/Truck Liability/Medical Schedule P-Part 1D-Workers' Compensation (Excluding Excess Workers Compensation) Schedule P-Part 1E-Commercial Multiple Peril			81
Schedule P-Part 1D-Workers' Compensation (Excluding Excess Workers Compensation)	38	Schedule P–Part 5R–Products Liability–Occurrence Schedule P–Part 5T–Warranty	81 83
Schedule P-Part 1D-Workers' Compensation (Excluding Excess Workers Compensation) Schedule P-Part 1E-Commercial Multiple Peril Schedule P-Part 1F-Section 1-Medical Professional Liability-Occurrence Schedule P-Part 1F-Section 2-Medical Professional Liability-Claims-Made	38 39	Schedule P–Part 5R–Products Liability–Occurrence Schedule P–Part 5T–Warranty Schedule P–Part 6C–Commercial Auto/Truck Liability/Medical	81 83 84
Schedule P-Part 1D-Workers' Compensation (Excluding Excess Workers Compensation) Schedule P-Part 1E-Commercial Multiple Peril Schedule P-Part 1F-Section 1-Medical Professional Liability-Occurrence	38 39 40 41 42	Schedule P–Part 5R–Products Liability–Occurrence Schedule P–Part 5T–Warranty Schedule P–Part 6C–Commercial Auto/Truck Liability/Medical Schedule P–Part 6D–Workers' Compensation (Excluding Excess Workers Compensation)	81 83 84 84 85 86
Schedule P-Part 1D-Workers' Compensation (Excluding Excess Workers Compensation) Schedule P-Part 1E-Commercial Multiple Peril Schedule P-Part 1F-Section 1-Medical Professional Liability-Occurrence Schedule P-Part 1F-Section 2-Medical Professional Liability-Claims-Made Schedule P-Part 1G-Special Liability (Ocean, Marine, Aircraft (All Perils), Boiler & Machinery) Schedule P-Part 1H-Section 1-Other Liability-Occurrence	38 39 40 41 42 43	Schedule P–Part 5R–Products Liability–Occurrence Schedule P–Part 5T–Warranty Schedule P–Part 6C–Commercial Auto/Truck Liability/Medical Schedule P–Part 6D–Workers' Compensation (Excluding Excess Workers Compensation) Schedule P–Part 6E–Commercial Multiple Peril Schedule P–Part 6H–Other Liability–Claims-Made Schedule P–Part 6H–Other Liability–Occurrence	81 83 84 84 85 86 85
Schedule P-Part 1D-Workers' Compensation (Excluding Excess Workers Compensation) Schedule P-Part 1E-Commercial Multiple Peril Schedule P-Part 1F-Section 1-Medical Professional Liability-Occurrence Schedule P-Part 1F-Section 2-Medical Professional Liability-Claims-Made Schedule P-Part 1G-Special Liability (Ocean, Marine, Aircraft (All Perils), Boiler & Machinery) Schedule P-Part 1H-Section 1-Other Liability-Occurrence Schedule P-Part 1H-Section 2-Other Liability-Claims-Made	38 39 40 41 42 43 44	Schedule P–Part 5R–Products Liability–Occurrence Schedule P–Part 5T–Warranty Schedule P–Part 6C–Commercial Auto/Truck Liability/Medical Schedule P–Part 6D–Workers' Compensation (Excluding Excess Workers Compensation) Schedule P–Part 6E–Commercial Multiple Peril Schedule P–Part 6H–Other Liability–Claims-Made Schedule P–Part 6H–Other Liability–Occurrence Schedule P–Part 6M–International	81 83 84 84 85 86 85
Schedule P-Part 1D-Workers' Compensation (Excluding Excess Workers Compensation) Schedule P-Part 1E-Commercial Multiple Peril Schedule P-Part 1F-Section 1-Medical Professional Liability-Occurrence Schedule P-Part 1F-Section 2-Medical Professional Liability-Claims-Made Schedule P-Part 1G-Special Liability (Ocean, Marine, Aircraft (All Perils), Boiler & Machinery) Schedule P-Part 1H-Section 1-Other Liability-Occurrence Schedule P-Part 1H-Section 2-Other Liability-Claims-Made Schedule P-Part 1I-Spec. Prop. (Fire, Allied Lines, Inland Marine, Earthquake, Burglary & Theft)	38 39 40 41 42 43 44 45	Schedule P-Part 5R-Products Liability-Occurrence Schedule P-Part 5T-Warranty Schedule P-Part 6C-Commercial Auto/Truck Liability/Medical Schedule P-Part 6D-Workers' Compensation (Excluding Excess Workers Compensation) Schedule P-Part 6E-Commercial Multiple Peril Schedule P-Part 6H-Other Liability-Claims-Made Schedule P-Part 6H-Other Liability-Occurrence Schedule P-Part 6M-International Schedule P-Part 6N-Reinsurance – Nonproportional Assumed Property	81 83 84 84 85 86 85 86
Schedule P-Part 1D-Workers' Compensation (Excluding Excess Workers Compensation) Schedule P-Part 1E-Commercial Multiple Peril Schedule P-Part 1F-Section 1-Medical Professional Liability-Occurrence Schedule P-Part 1F-Section 2-Medical Professional Liability-Claims-Made Schedule P-Part 1G-Special Liability (Ocean, Marine, Aircraft (All Perils), Boiler & Machinery) Schedule P-Part 1H-Section 1-Other Liability-Occurrence Schedule P-Part 1H-Section 2-Other Liability-Claims-Made Schedule P-Part 1I-Spec. Prop. (Fire, Allied Lines, Inland Marine, Earthquake, Burglary & Theft) Schedule P-Part 1J-Auto Physical Damage	38 39 40 41 42 43 44 45 46	Schedule P-Part 5R-Products Liability-Occurrence Schedule P-Part 5T-Warranty Schedule P-Part 6C-Commercial Auto/Truck Liability/Medical Schedule P-Part 6D-Workers' Compensation (Excluding Excess Workers Compensation) Schedule P-Part 6E-Commercial Multiple Peril Schedule P-Part 6H-Other Liability-Claims-Made Schedule P-Part 6H-Other Liability-Occurrence Schedule P-Part 6M-International Schedule P-Part 6N-Reinsurance - Nonproportional Assumed Property Schedule P-Part 6O-Reinsurance - Nonproportional Assumed Liability	81 83 84 84 85 86 85 86 87
Schedule P-Part 1D-Workers' Compensation (Excluding Excess Workers Compensation) Schedule P-Part 1E-Commercial Multiple Peril Schedule P-Part 1F-Section 1-Medical Professional Liability-Occurrence Schedule P-Part 1F-Section 2-Medical Professional Liability-Claims-Made Schedule P-Part 1G-Special Liability (Ocean, Marine, Aircraft (All Perils), Boiler & Machinery) Schedule P-Part 1H-Section 1-Other Liability-Occurrence Schedule P-Part 1H-Section 2-Other Liability-Claims-Made Schedule P-Part 1H-Spec. Prop. (Fire, Allied Lines, Inland Marine, Earthquake, Burglary & Theft) Schedule P-Part 1J-Auto Physical Damage Schedule P-Part 1K-Fidelity/Surety	38 39 40 41 42 43 44 45 46 47	Schedule P-Part 5R-Products Liability-Occurrence Schedule P-Part 5T-Warranty Schedule P-Part 6C-Commercial Auto/Truck Liability/Medical Schedule P-Part 6D-Workers' Compensation (Excluding Excess Workers Compensation) Schedule P-Part 6E-Commercial Multiple Peril Schedule P-Part 6H-Other Liability-Claims-Made Schedule P-Part 6H-Other Liability-Occurrence Schedule P-Part 6M-International Schedule P-Part 6N-Reinsurance - Nonproportional Assumed Property Schedule P-Part 6O-Reinsurance - Nonproportional Assumed Liability Schedule P-Part 6R-Products Liability-Claims-Made	81 83 84 84 85 86 86 87 87
Schedule P-Part 1D-Workers' Compensation (Excluding Excess Workers Compensation) Schedule P-Part 1E-Commercial Multiple Peril Schedule P-Part 1F-Section 1-Medical Professional Liability-Occurrence Schedule P-Part 1F-Section 2-Medical Professional Liability-Claims-Made Schedule P-Part 1G-Special Liability (Ocean, Marine, Aircraft (All Perils), Boiler & Machinery) Schedule P-Part 1H-Section 1-Other Liability-Occurrence Schedule P-Part 1H-Specion 2-Other Liability-Claims-Made Schedule P-Part 11-Spec. Prop. (Fire, Allied Lines, Inland Marine, Earthquake, Burglary & Theft) Schedule P-Part 1J-Auto Physical Damage Schedule P-Part 1K-Fidelity/Surety Schedule P-Part 1L-Other (Including Credit, Accident and Health)	38 39 40 41 42 43 44 45 46 47	Schedule P-Part 5R-Products Liability-Occurrence Schedule P-Part 5T-Warranty Schedule P-Part 6C-Commercial Auto/Truck Liability/Medical Schedule P-Part 6D-Workers' Compensation (Excluding Excess Workers Compensation) Schedule P-Part 6E-Commercial Multiple Peril Schedule P-Part 6H-Other Liability-Claims-Made Schedule P-Part 6H-Other Liability-Occurrence Schedule P-Part 6M-International Schedule P-Part 6M-Reinsurance - Nonproportional Assumed Property Schedule P-Part 6O-Reinsurance - Nonproportional Assumed Liability Schedule P-Part 6R-Products Liability-Claims-Made Schedule P-Part 6R-Products Liability-Occurrence	81 83 84 84 85 86 85 86 87 87 87
Schedule P-Part 1D-Workers' Compensation (Excluding Excess Workers Compensation) Schedule P-Part 1E-Commercial Multiple Peril Schedule P-Part 1F-Section 1-Medical Professional Liability-Occurrence Schedule P-Part 1F-Section 2-Medical Professional Liability-Claims-Made Schedule P-Part 1G-Special Liability (Ocean, Marine, Aircraft (All Perils), Boiler & Machinery) Schedule P-Part 1H-Section 1-Other Liability-Occurrence Schedule P-Part 1H-Section 2-Other Liability-Claims-Made Schedule P-Part 11-Spec. Prop. (Fire, Allied Lines, Inland Marine, Earthquake, Burglary & Theft) Schedule P-Part 1J-Auto Physical Damage Schedule P-Part 1K-Fidelity/Surety Schedule P-Part 1L-Other (Including Credit, Accident and Health) Schedule P-Part 1M-International	38 39 40 41 42 43 44 45 46 47 48	Schedule P-Part 5R-Products Liability-Occurrence Schedule P-Part 5T-Warranty Schedule P-Part 6C-Commercial Auto/Truck Liability/Medical Schedule P-Part 6D-Workers' Compensation (Excluding Excess Workers Compensation) Schedule P-Part 6E-Commercial Multiple Peril Schedule P-Part 6H-Other Liability-Claims-Made Schedule P-Part 6H-Other Liability-Occurrence Schedule P-Part 6M-International Schedule P-Part 6M-Reinsurance - Nonproportional Assumed Property Schedule P-Part 6N-Reinsurance - Nonproportional Assumed Liability Schedule P-Part 6R-Products Liability-Claims-Made Schedule P-Part 6R-Products Liability-Occurrence Schedule P-Part 7A-Primary Loss Sensitive Contracts	81 83 84 84 85 86 85 86 87 87 87 88
Schedule P-Part 1D-Workers' Compensation (Excluding Excess Workers Compensation) Schedule P-Part 1E-Commercial Multiple Peril Schedule P-Part 1F-Section 1-Medical Professional Liability-Occurrence Schedule P-Part 1F-Section 2-Medical Professional Liability-Claims-Made Schedule P-Part 1G-Special Liability (Ocean, Marine, Aircraft (All Perils), Boiler & Machinery) Schedule P-Part 1H-Section 1-Other Liability-Occurrence Schedule P-Part 1H-Section 2-Other Liability-Claims-Made Schedule P-Part 11-Spec. Prop. (Fire, Allied Lines, Inland Marine, Earthquake, Burglary & Theft) Schedule P-Part 1J-Auto Physical Damage Schedule P-Part 1K-Fidelity/Surety Schedule P-Part 1L-Other (Including Credit, Accident and Health) Schedule P-Part 1M-International Schedule P-Part 1N-Reinsurance - Nonproportional Assumed Property	38 39 40 41 42 43 44 45 46 47 48 49 50	Schedule P-Part 5R-Products Liability-Occurrence Schedule P-Part 5T-Warranty Schedule P-Part 6C-Commercial Auto/Truck Liability/Medical Schedule P-Part 6D-Workers' Compensation (Excluding Excess Workers Compensation) Schedule P-Part 6E-Commercial Multiple Peril Schedule P-Part 6H-Other Liability-Claims-Made Schedule P-Part 6H-Other Liability-Occurrence Schedule P-Part 6M-International Schedule P-Part 6M-International Schedule P-Part 6N-Reinsurance – Nonproportional Assumed Property Schedule P-Part 6N-Reinsurance – Nonproportional Assumed Liability Schedule P-Part 6R-Products Liability-Claims-Made Schedule P-Part 6R-Products Liability-Occurrence Schedule P-Part 7A-Primary Loss Sensitive Contracts Schedule P-Part 7B-Reinsurance Loss Sensitive Contracts	81 83 84 84 85 86 85 86 87 87 87 88 88
Schedule P-Part 1D-Workers' Compensation (Excluding Excess Workers Compensation) Schedule P-Part 1E-Commercial Multiple Peril Schedule P-Part 1F-Section 1-Medical Professional Liability-Occurrence Schedule P-Part 1F-Section 2-Medical Professional Liability-Claims-Made Schedule P-Part 1G-Special Liability (Ocean, Marine, Aircraft (All Perils), Boiler & Machinery) Schedule P-Part 1H-Section 1-Other Liability-Occurrence Schedule P-Part 1H-Section 2-Other Liability-Claims-Made Schedule P-Part 1H-Spec. Prop. (Fire, Allied Lines, Inland Marine, Earthquake, Burglary & Theft) Schedule P-Part 1J-Auto Physical Damage Schedule P-Part 1K-Fidelity/Surety Schedule P-Part 1L-Other (Including Credit, Accident and Health) Schedule P-Part 1M-International Schedule P-Part 1N-Reinsurance – Nonproportional Assumed Property Schedule P-Part 1O-Reinsurance – Nonproportional Assumed Liability	38 39 40 41 42 43 44 45 46 47 48 49 50	Schedule P-Part 5R-Products Liability-Occurrence Schedule P-Part 5T-Warranty Schedule P-Part 6C-Commercial Auto/Truck Liability/Medical Schedule P-Part 6D-Workers' Compensation (Excluding Excess Workers Compensation) Schedule P-Part 6E-Commercial Multiple Peril Schedule P-Part 6H-Other Liability-Claims-Made Schedule P-Part 6H-Other Liability-Occurrence Schedule P-Part 6M-International Schedule P-Part 6N-Reinsurance - Nonproportional Assumed Property Schedule P-Part 6N-Reinsurance - Nonproportional Assumed Liability Schedule P-Part 6R-Products Liability-Claims-Made Schedule P-Part 6R-Products Liability-Occurrence Schedule P-Part 7A-Primary Loss Sensitive Contracts Schedule P-Part 7B-Reinsurance Loss Sensitive Contracts Schedule P-Interrogatories	81 83 84 84 85 86 85 86 87 87 87 88 88 89 91
Schedule P-Part 1D-Workers' Compensation (Excluding Excess Workers Compensation) Schedule P-Part 1E-Commercial Multiple Peril Schedule P-Part 1F-Section 1-Medical Professional Liability-Occurrence Schedule P-Part 1F-Section 2-Medical Professional Liability-Claims-Made Schedule P-Part 1G-Special Liability (Ocean, Marine, Aircraft (All Perils), Boiler & Machinery) Schedule P-Part 1H-Section 1-Other Liability-Occurrence Schedule P-Part 1H-Section 2-Other Liability-Claims-Made Schedule P-Part 1H-Spec. Prop. (Fire, Allied Lines, Inland Marine, Earthquake, Burglary & Theft) Schedule P-Part 1J-Auto Physical Damage Schedule P-Part 1J-Hother (Including Credit, Accident and Health) Schedule P-Part 1M-International Schedule P-Part 1N-Reinsurance – Nonproportional Assumed Property Schedule P-Part 1O-Reinsurance – Nonproportional Assumed Financial Lines	38 39 40 41 42 43 44 45 46 47 48 49 50 51	Schedule P-Part 5R-Products Liability-Occurrence Schedule P-Part 5T-Warranty Schedule P-Part 6C-Commercial Auto/Truck Liability/Medical Schedule P-Part 6D-Workers' Compensation (Excluding Excess Workers Compensation) Schedule P-Part 6E-Commercial Multiple Peril Schedule P-Part 6H-Other Liability-Claims-Made Schedule P-Part 6H-Other Liability-Occurrence Schedule P-Part 6M-International Schedule P-Part 6N-Reinsurance - Nonproportional Assumed Property Schedule P-Part 6N-Reinsurance - Nonproportional Assumed Liability Schedule P-Part 6R-Products Liability-Claims-Made Schedule P-Part 6R-Products Liability-Claims-Made Schedule P-Part 7A-Primary Loss Sensitive Contracts Schedule P-Part 7B-Reinsurance Loss Sensitive Contracts Schedule P Interrogatories Schedule T-Exhibit of Premiums Written	81 83 84 84 85 86 85 86 87 87 88 88 89 91
Schedule P-Part 1D-Workers' Compensation (Excluding Excess Workers Compensation) Schedule P-Part 1E-Commercial Multiple Peril Schedule P-Part 1F-Section 1-Medical Professional Liability-Occurrence Schedule P-Part 1F-Section 2-Medical Professional Liability-Claims-Made Schedule P-Part 1G-Special Liability (Ocean, Marine, Aircraft (All Perils), Boiler & Machinery) Schedule P-Part 1H-Section 1-Other Liability-Occurrence Schedule P-Part 1H-Section 2-Other Liability-Claims-Made Schedule P-Part 11-Spec. Prop. (Fire, Allied Lines, Inland Marine, Earthquake, Burglary & Theft) Schedule P-Part 1J-Auto Physical Damage Schedule P-Part 1K-Fidelity/Surety Schedule P-Part 1L-Other (Including Credit, Accident and Health) Schedule P-Part 1N-International Schedule P-Part 1N-Reinsurance – Nonproportional Assumed Property Schedule P-Part 10-Reinsurance – Nonproportional Assumed Financial Lines Schedule P-Part 1R-Section 1-Products Liability-Occurrence	38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53	Schedule P-Part 5R-Products Liability-Occurrence Schedule P-Part 6C-Commercial Auto/Truck Liability/Medical Schedule P-Part 6D-Workers' Compensation (Excluding Excess Workers Compensation) Schedule P-Part 6B-Commercial Multiple Peril Schedule P-Part 6H-Other Liability-Claims-Made Schedule P-Part 6H-Other Liability-Occurrence Schedule P-Part 6M-International Schedule P-Part 6N-Reinsurance - Nonproportional Assumed Property Schedule P-Part 6C-Reinsurance - Nonproportional Assumed Liability Schedule P-Part 6R-Products Liability-Claims-Made Schedule P-Part 6R-Products Liability-Claims-Made Schedule P-Part 7A-Primary Loss Sensitive Contracts Schedule P-Part 7B-Reinsurance Loss Sensitive Contracts Schedule P-Interrogatories Schedule P Interrogatories Schedule T-Exhibit of Premiums Written Schedule T-Part 2-Interstate Compact	81 83 84 84 85 86 87 87 87 87 89 91 93
Schedule P-Part 1D-Workers' Compensation (Excluding Excess Workers Compensation) Schedule P-Part 1E-Commercial Multiple Peril Schedule P-Part 1F-Section 1-Medical Professional Liability-Occurrence Schedule P-Part 1F-Section 2-Medical Professional Liability-Claims-Made Schedule P-Part 1G-Special Liability (Ocean, Marine, Aircraft (All Perils), Boiler & Machinery) Schedule P-Part 1H-Section 1-Other Liability-Occurrence Schedule P-Part 1H-Section 2-Other Liability-Claims-Made Schedule P-Part 1J-Spec. Prop. (Fire, Allied Lines, Inland Marine, Earthquake, Burglary & Theft) Schedule P-Part 1J-Auto Physical Damage Schedule P-Part 1J-Auto Physical Damage Schedule P-Part 1K-Fidelity/Surety Schedule P-Part 1M-International Schedule P-Part 1M-Reinsurance – Nonproportional Assumed Property Schedule P-Part 1O-Reinsurance – Nonproportional Assumed Liability Schedule P-Part 1P-Reinsurance – Nonproportional Assumed Financial Lines Schedule P-Part 1R-Section 1-Products Liability-Occurrence Schedule P-Part 1R-Section 2-Products Liability-Claims-Made	38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54	Schedule P-Part 5R-Products Liability-Occurrence Schedule P-Part 6C-Commercial Auto/Truck Liability/Medical Schedule P-Part 6D-Workers' Compensation (Excluding Excess Workers Compensation) Schedule P-Part 6B-Commercial Multiple Peril Schedule P-Part 6H-Other Liability-Claims-Made Schedule P-Part 6H-Other Liability-Occurrence Schedule P-Part 6M-International Schedule P-Part 6N-Reinsurance - Nonproportional Assumed Property Schedule P-Part 6C-Reinsurance - Nonproportional Assumed Liability Schedule P-Part 6R-Products Liability-Claims-Made Schedule P-Part 6R-Products Liability-Claims-Made Schedule P-Part 7A-Primsur Loss Sensitive Contracts Schedule P-Part 7B-Reinsurance Loss Sensitive Contracts Schedule P-Part 2-Interstate Compact Schedule Y-Information Concerning Activities of Insurer Members of a Holding Company Group	81 83 84 84 85 86 87 87 87 87 89 91 93 94 95
Schedule P-Part 1D-Workers' Compensation (Excluding Excess Workers Compensation) Schedule P-Part 1E-Commercial Multiple Peril Schedule P-Part 1F-Section 1-Medical Professional Liability-Occurrence Schedule P-Part 1F-Section 2-Medical Professional Liability-Claims-Made Schedule P-Part 1G-Special Liability (Ocean, Marine, Aircraft (All Perils), Boiler & Machinery) Schedule P-Part 1H-Section 1-Other Liability-Occurrence Schedule P-Part 1H-Section 2-Other Liability-Claims-Made Schedule P-Part 1H-Spec. Prop. (Fire, Allied Lines, Inland Marine, Earthquake, Burglary & Theft) Schedule P-Part 1J-Auto Physical Damage Schedule P-Part 1J-Auto Physical Damage Schedule P-Part 1M-Including Credit, Accident and Health) Schedule P-Part 1M-International Schedule P-Part 1N-Reinsurance – Nonproportional Assumed Property Schedule P-Part 1O-Reinsurance – Nonproportional Assumed Liability Schedule P-Part 1P-Reinsurance – Nonproportional Assumed Financial Lines Schedule P-Part 1R-Section 1-Products Liability-Occurrence Schedule P-Part 1R-Section 2-Products Liability-Claims-Made Schedule P-Part 1S-Financial Guaranty/Mortgage Guaranty	38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53	Schedule P-Part 5R-Products Liability-Occurrence Schedule P-Part 6C-Commercial Auto/Truck Liability/Medical Schedule P-Part 6D-Workers' Compensation (Excluding Excess Workers Compensation) Schedule P-Part 6B-Commercial Multiple Peril Schedule P-Part 6H-Other Liability-Claims-Made Schedule P-Part 6H-Other Liability-Occurrence Schedule P-Part 6M-International Schedule P-Part 6N-Reinsurance - Nonproportional Assumed Property Schedule P-Part 6O-Reinsurance - Nonproportional Assumed Liability Schedule P-Part 6R-Products Liability-Claims-Made Schedule P-Part 6R-Products Liability-Claims-Made Schedule P-Part 7A-Primary Loss Sensitive Contracts Schedule P-Part 7B-Reinsurance Loss Sensitive Contracts Schedule T-Exhibit of Premiums Written Schedule T-Part 2-Interstate Compact Schedule Y-Information Concerning Activities of Insurer Members of a Holding Company Group Schedule Y-Detail of Insurance Holding Company System	81 83 84 84 85 86 87 87 88 88 89 91 93 94 95
Schedule P-Part 1D-Workers' Compensation (Excluding Excess Workers Compensation) Schedule P-Part 1E-Commercial Multiple Peril Schedule P-Part 1F-Section 1-Medical Professional Liability-Occurrence Schedule P-Part 1F-Section 2-Medical Professional Liability-Claims-Made Schedule P-Part 1G-Special Liability (Ocean, Marine, Aircraft (All Perils), Boiler & Machinery) Schedule P-Part 1H-Section 1-Other Liability-Occurrence Schedule P-Part 1H-Section 2-Other Liability-Claims-Made Schedule P-Part 1J-Spec. Prop. (Fire, Allied Lines, Inland Marine, Earthquake, Burglary & Theft) Schedule P-Part 1J-Auto Physical Damage Schedule P-Part 1J-Auto Physical Damage Schedule P-Part 1K-Fidelity/Surety Schedule P-Part 1M-International Schedule P-Part 1M-Reinsurance – Nonproportional Assumed Property Schedule P-Part 1O-Reinsurance – Nonproportional Assumed Liability Schedule P-Part 1P-Reinsurance – Nonproportional Assumed Financial Lines Schedule P-Part 1R-Section 1-Products Liability-Occurrence Schedule P-Part 1R-Section 2-Products Liability-Claims-Made	38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54	Schedule P-Part 5R-Products Liability-Occurrence Schedule P-Part 6C-Commercial Auto/Truck Liability/Medical Schedule P-Part 6D-Workers' Compensation (Excluding Excess Workers Compensation) Schedule P-Part 6B-Commercial Multiple Peril Schedule P-Part 6H-Other Liability-Claims-Made Schedule P-Part 6H-Other Liability-Occurrence Schedule P-Part 6M-International Schedule P-Part 6N-Reinsurance - Nonproportional Assumed Property Schedule P-Part 6C-Reinsurance - Nonproportional Assumed Liability Schedule P-Part 6R-Products Liability-Claims-Made Schedule P-Part 6R-Products Liability-Claims-Made Schedule P-Part 7A-Primsur Loss Sensitive Contracts Schedule P-Part 7B-Reinsurance Loss Sensitive Contracts Schedule P-Part 2-Interstate Compact Schedule Y-Information Concerning Activities of Insurer Members of a Holding Company Group	81 83 84 84 85 86 87 87 87 87 89 91 93 94 95
Schedule P-Part 1D-Workers' Compensation (Excluding Excess Workers Compensation) Schedule P-Part 1E-Commercial Multiple Peril Schedule P-Part 1F-Section 1-Medical Professional Liability-Occurrence Schedule P-Part 1F-Section 2-Medical Professional Liability-Claims-Made Schedule P-Part 1G-Special Liability (Ocean, Marine, Aircraft (All Perils), Boiler & Machinery) Schedule P-Part 1H-Section 1-Other Liability-Occurrence Schedule P-Part 1H-Section 2-Other Liability-Claims-Made Schedule P-Part 1H-Section 2-Other Liability-Claims-Made Schedule P-Part 1J-Auto Physical Damage Schedule P-Part 1J-Auto Physical Damage Schedule P-Part 1K-Fidelity/Surety Schedule P-Part 1L-Other (Including Credit, Accident and Health) Schedule P-Part 1M-International Schedule P-Part 1N-Reinsurance - Nonproportional Assumed Property Schedule P-Part 1O-Reinsurance - Nonproportional Assumed Liability Schedule P-Part 1P-Reinsurance - Nonproportional Assumed Financial Lines Schedule P-Part 1R-Section 1-Products Liability-Occurrence Schedule P-Part 1R-Section 2-Products Liability-Claims-Made Schedule P-Part 1S-Financial Guaranty/Mortgage Guaranty Schedule P-Part 1T-Warranty	38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56	Schedule P-Part 5R-Products Liability-Occurrence Schedule P-Part 6C-Commercial Auto/Truck Liability/Medical Schedule P-Part 6D-Workers' Compensation (Excluding Excess Workers Compensation) Schedule P-Part 6B-Commercial Multiple Peril Schedule P-Part 6H-Other Liability-Claims-Made Schedule P-Part 6H-Other Liability-Occurrence Schedule P-Part 6H-Other Liability-Occurrence Schedule P-Part 6N-Reinsurance - Nonproportional Assumed Property Schedule P-Part 6O-Reinsurance - Nonproportional Assumed Liability Schedule P-Part 6R-Products Liability-Claims-Made Schedule P-Part 6R-Products Liability-Claims-Made Schedule P-Part 7A-Primary Loss Sensitive Contracts Schedule P-Part 7B-Reinsurance Loss Sensitive Contracts Schedule P-Part 7B-Reinsurance Loss Sensitive Contracts Schedule T-Part 2-Interstate Compact Schedule T-Part 2-Interstate Compact Schedule Y-Information Concerning Activities of Insurer Members of a Holding Company Group Schedule Y-Detail of Insurance Holding Company System Schedule Y-Part 2-Summary of Insurer's Transactions With Any Affiliates	81 83 84 84 85 86 87 87 87 88 88 99 91 93 94 95 96
Schedule P-Part 1D-Workers' Compensation (Excluding Excess Workers Compensation) Schedule P-Part 1E-Commercial Multiple Peril Schedule P-Part 1F-Section 1-Medical Professional Liability-Occurrence Schedule P-Part 1F-Section 2-Medical Professional Liability-Claims-Made Schedule P-Part 1G-Special Liability (Ocean, Marine, Aircraft (All Perils), Boiler & Machinery) Schedule P-Part 1H-Section 1-Other Liability-Occurrence Schedule P-Part 1H-Section 2-Other Liability-Claims-Made Schedule P-Part 1H-Spec. Prop. (Fire, Allied Lines, Inland Marine, Earthquake, Burglary & Theft) Schedule P-Part 1J-Auto Physical Damage Schedule P-Part 1K-Fidelity/Surety Schedule P-Part 1L-Other (Including Credit, Accident and Health) Schedule P-Part 1M-International Schedule P-Part 1M-Reinsurance – Nonproportional Assumed Property Schedule P-Part 1P-Reinsurance – Nonproportional Assumed Liability Schedule P-Part 1R-Section 1-Products Liability-Occurrence Schedule P-Part 1R-Section 2-Products Liability-Claims-Made Schedule P-Part 1S-Financial Guaranty/Mortgage Guaranty Schedule P-Part 1T-Warranty Schedule P-Part 1T-Warranty	38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 34	Schedule P-Part 5R-Products Liability-Occurrence Schedule P-Part 6C-Commercial Auto/Truck Liability/Medical Schedule P-Part 6D-Workers' Compensation (Excluding Excess Workers Compensation) Schedule P-Part 6E-Commercial Multiple Peril Schedule P-Part 6H-Other Liability-Claims-Made Schedule P-Part 6H-Other Liability-Occurrence Schedule P-Part 6H-Other Liability-Occurrence Schedule P-Part 6N-International Schedule P-Part 6N-Reinsurance - Nonproportional Assumed Property Schedule P-Part 6C-Reinsurance - Nonproportional Assumed Liability Schedule P-Part 6R-Products Liability-Claims-Made Schedule P-Part 6R-Products Liability-Occurrence Schedule P-Part 7A-Primary Loss Sensitive Contracts Schedule P-Part 7B-Reinsurance Loss Sensitive Contracts Schedule P-Part 7B-Reinsurance Loss Sensitive Contracts Schedule T-Part 2-Interstate Compact Schedule T-Part 2-Interstate Compact Schedule Y-Information Concerning Activities of Insurer Members of a Holding Company Group Schedule Y-Detail of Insurance Holding Company System Schedule Y-Part 2-Summary of Insurer's Transactions With Any Affiliates Statement of Income	81 83 84 84 85 86 87 87 88 88 89 91 93 94 95 96
Schedule P-Part 1D-Workers' Compensation (Excluding Excess Workers Compensation) Schedule P-Part 1E-Commercial Multiple Peril Schedule P-Part 1F-Section 1-Medical Professional Liability-Occurrence Schedule P-Part 1F-Section 2-Medical Professional Liability-Claims-Made Schedule P-Part 1G-Special Liability (Ocean, Marine, Aircraft (All Perils), Boiler & Machinery) Schedule P-Part 1H-Section 1-Other Liability-Occurrence Schedule P-Part 1H-Section 2-Other Liability-Claims-Made Schedule P-Part 11-Spec. Prop. (Fire, Allied Lines, Inland Marine, Earthquake, Burglary & Theft) Schedule P-Part 1J-Auto Physical Damage Schedule P-Part 1K-Fidelity/Surety Schedule P-Part 1L-Other (Including Credit, Accident and Health) Schedule P-Part 1M-International Schedule P-Part 1N-Reinsurance – Nonproportional Assumed Property Schedule P-Part 10-Reinsurance – Nonproportional Assumed Financial Lines Schedule P-Part 1R-Section 1-Products Liability-Occurrence Schedule P-Part 1R-Section 2-Products Liability-Claims-Made Schedule P-Part 1S-Financial Guaranty/Mortgage Guaranty Schedule P-Part 1, Part 3 and Part 4 - Summary Schedule P-Part 2, Part 3 and Part 4 - Summary Schedule P-Part 2A-Homeowners/Farmowners	38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 34 57	Schedule P-Part 5R-Products Liability-Occurrence Schedule P-Part 6C-Commercial Auto/Truck Liability/Medical Schedule P-Part 6D-Workers' Compensation (Excluding Excess Workers Compensation) Schedule P-Part 6E-Commercial Multiple Peril Schedule P-Part 6H-Other Liability-Claims-Made Schedule P-Part 6H-Other Liability-Occurrence Schedule P-Part 6H-Other Liability-Occurrence Schedule P-Part 6N-Reinsurance - Nonproportional Assumed Property Schedule P-Part 6O-Reinsurance - Nonproportional Assumed Liability Schedule P-Part 6R-Products Liability-Claims-Made Schedule P-Part 6R-Products Liability-Claims-Made Schedule P-Part 7A-Primary Loss Sensitive Contracts Schedule P-Part 7A-Primary Loss Sensitive Contracts Schedule P-Part 7B-Reinsurance Loss Sensitive Contracts Schedule P-Part 7B-Reinsurance Loss Sensitive Contracts Schedule T-Exhibit of Premiums Written Schedule T-Part 2-Interstate Compact Schedule Y-Information Concerning Activities of Insurer Members of a Holding Company Group Schedule Y-Detail of Insurance Holding Company System Schedule Y-Part 2-Summary of Insurer's Transactions With Any Affiliates Statement of Income Summary Investment Schedule	81 83 84 84 85 86 87 87 88 88 89 91 93 94 95 96 97 98 4
Schedule P-Part 1D-Workers' Compensation (Excluding Excess Workers Compensation) Schedule P-Part 1E-Commercial Multiple Peril Schedule P-Part 1F-Section 1-Medical Professional Liability-Occurrence Schedule P-Part 1F-Section 2-Medical Professional Liability-Claims-Made Schedule P-Part 1G-Special Liability (Ocean, Marine, Aircraft (All Perils), Boiler & Machinery) Schedule P-Part 1H-Section 1-Other Liability-Occurrence Schedule P-Part 1H-Section 2-Other Liability-Claims-Made Schedule P-Part 11-Spec. Prop. (Fire, Allied Lines, Inland Marine, Earthquake, Burglary & Theft) Schedule P-Part 1J-Auto Physical Damage Schedule P-Part 1K-Fidelity/Surety Schedule P-Part 1L-Other (Including Credit, Accident and Health) Schedule P-Part 1M-International Schedule P-Part 1N-Reinsurance – Nonproportional Assumed Property Schedule P-Part 1O-Reinsurance – Nonproportional Assumed Financial Lines Schedule P-Part 1R-Section 1-Products Liability-Occurrence Schedule P-Part 1R-Section 2-Products Liability-Occurrence Schedule P-Part 1S-Financial Guaranty/Mortgage Guaranty Schedule P-Part 17-Warranty Schedule P-Part 2A-Homeowners/Farmowners Schedule P-Part 2B-Private Passenger Auto Liability/Medical	38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 55 56 34 57	Schedule P-Part 5R-Products Liability-Occurrence Schedule P-Part 5T-Warranty Schedule P-Part 6C-Commercial Auto/Truck Liability/Medical Schedule P-Part 6D-Workers' Compensation (Excluding Excess Workers Compensation) Schedule P-Part 6E-Commercial Multiple Peril Schedule P-Part 6H-Other Liability-Claims-Made Schedule P-Part 6H-Other Liability-Occurrence Schedule P-Part 6M-International Schedule P-Part 6M-Reinsurance - Nonproportional Assumed Property Schedule P-Part 6O-Reinsurance - Nonproportional Assumed Liability Schedule P-Part 6R-Products Liability-Claims-Made Schedule P-Part 6R-Products Liability-Claims-Made Schedule P-Part 7A-Primary Loss Sensitive Contracts Schedule P-Part 7B-Reinsurance Loss Sensitive Contracts Schedule P-Part 7B-Reinsurance Loss Sensitive Contracts Schedule T-Exhibit of Premiums Written Schedule T-Part 2-Interstate Compact Schedule T-Part 2-Interstate Compact Schedule Y-Detail of Insurance Holding Company System Schedule Y-Part 2-Summary of Insurer's Transactions With Any Affiliates Statement of Income Summary Investment Schedule Supplemental Exhibits and Schedules Interrogatories	81 83 84 84 85 86 87 87 88 88 99 91 93 94 95 96 97 98 4 SIO1
Schedule P-Part 1D-Workers' Compensation (Excluding Excess Workers Compensation) Schedule P-Part 1E-Commercial Multiple Peril Schedule P-Part 1F-Section 1-Medical Professional Liability-Occurrence Schedule P-Part 1F-Section 2-Medical Professional Liability-Claims-Made Schedule P-Part 1G-Special Liability (Ocean, Marine, Aircraft (All Perils), Boiler & Machinery) Schedule P-Part 1H-Section 1-Other Liability-Occurrence Schedule P-Part 1H-Section 2-Other Liability-Claims-Made Schedule P-Part 1H-Spec. Prop. (Fire, Allied Lines, Inland Marine, Earthquake, Burglary & Theft) Schedule P-Part 1J-Auto Physical Damage Schedule P-Part 1J-Auto Physical Damage Schedule P-Part 1M-International Schedule P-Part 1M-International Schedule P-Part 1M-Reinsurance - Nonproportional Assumed Property Schedule P-Part 10-Reinsurance - Nonproportional Assumed Liability Schedule P-Part 1D-Reinsurance - Nonproportional Assumed Financial Lines Schedule P-Part 1R-Section 1-Products Liability-Occurrence Schedule P-Part 1R-Section 2-Products Liability-Claims-Made Schedule P-Part 1S-Financial Guaranty/Mortgage Guaranty Schedule P-Part 1-Warranty Schedule P-Part 2A-Homeowners/Farmowners Schedule P-Part 2A-Homeowners/Farmowners Schedule P-Part 2A-Homeowners/Farmowners Schedule P-Part 2B-Private Passenger Auto Liability/Medical Schedule P-Part 2D-Workers' Compensation (Excluding Excess Workers Compensation) Schedule P-Part 2E-Commercial Multiple Peril	38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 34 57 57 57	Schedule P-Part 5R-Products Liability-Occurrence Schedule P-Part 6C-Commercial Auto/Truck Liability/Medical Schedule P-Part 6D-Workers' Compensation (Excluding Excess Workers Compensation) Schedule P-Part 6B-Workers' Compensation (Excluding Excess Workers Compensation) Schedule P-Part 6B-Commercial Multiple Peril Schedule P-Part 6H-Other Liability-Claims-Made Schedule P-Part 6H-Other Liability-Occurrence Schedule P-Part 6M-International Schedule P-Part 6N-Reinsurance – Nonproportional Assumed Property Schedule P-Part 6Part 6C-Reinsurance – Nonproportional Assumed Liability Schedule P-Part 6R-Products Liability-Occurrence Schedule P-Part 7A-Primary Loss Sensitive Contracts Schedule P-Part 7A-Primary Loss Sensitive Contracts Schedule P-Part 7B-Reinsurance Loss Sensitive Contracts Schedule P Interrogatories Schedule P Interrogatories Schedule P Interrogatories Schedule T-Part 2-Interstate Compact Schedule Y-Information Concerning Activities of Insurer Members of a Holding Company Group Schedule Y-Detail of Insurance Holding Company System Schedule Y-Part 2-Summary of Insurer's Transactions With Any Affiliates Statement of Income Summary Investment Schedule Supplemental Exhibits and Schedules Interrogatories Underwriting and Investment Exhibit Part 1 Underwriting and Investment Exhibit Part 1B	81 83 84 84 85 86 86 87 87 88 88 89 91 91 95 96 97 98 4 SIO1 99 6
Schedule P-Part 1D-Workers' Compensation (Excluding Excess Workers Compensation) Schedule P-Part 1E-Commercial Multiple Peril Schedule P-Part 1F-Section 1-Medical Professional Liability-Occurrence Schedule P-Part 1F-Section 2-Medical Professional Liability-Claims-Made Schedule P-Part 1G-Special Liability (Ocean, Marine, Aircraft (All Perils), Boiler & Machinery) Schedule P-Part 1H-Section 1-Other Liability-Occurrence Schedule P-Part 1H-Section 2-Other Liability-Claims-Made Schedule P-Part 1H-Section 2-Other Liability-Claims-Made Schedule P-Part 1J-Auto Physical Damage Schedule P-Part 1J-Auto Physical Damage Schedule P-Part 1L-Other (Including Credit, Accident and Health) Schedule P-Part 1M-International Schedule P-Part 1N-Reinsurance – Nonproportional Assumed Property Schedule P-Part 10-Reinsurance – Nonproportional Assumed Liability Schedule P-Part 1D-Reinsurance – Nonproportional Assumed Financial Lines Schedule P-Part 1R-Section 1-Products Liability-Occurrence Schedule P-Part 1S-Financial Guaranty/Mortgage Guaranty Schedule P-Part 1T-Warranty Schedule P-Part 2A-Homeowners/Farmowners Schedule P-Part 2A-Homeowners/Farmowners Schedule P-Part 2B-Private Passenger Auto Liability/Medical Schedule P-Part 2C-Commercial Auto/Truck Liability/Medical Schedule P-Part 2C-Commercial Multiple Peril Schedule P-Part 2F-Section 1-Medical Professional Liability-Occurrence	38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 34 57 57 57 57 58	Schedule P-Part 5R-Products Liability-Occurrence Schedule P-Part 6C-Commercial Auto/Truck Liability/Medical Schedule P-Part 6D-Workers' Compensation (Excluding Excess Workers Compensation) Schedule P-Part 6B-Commercial Multiple Peril Schedule P-Part 6B-Commercial Multiple Peril Schedule P-Part 6H-Other Liability-Claims-Made Schedule P-Part 6H-Other Liability-Occurrence Schedule P-Part 6M-International Schedule P-Part 6N-Reinsurance - Nonproportional Assumed Property Schedule P-Part 6O-Reinsurance - Nonproportional Assumed Liability Schedule P-Part 6R-Products Liability-Claims-Made Schedule P-Part 6R-Products Liability-Claims-Made Schedule P-Part 7A-Primary Loss Sensitive Contracts Schedule P-Part 7A-Primary Loss Sensitive Contracts Schedule P-Part 7B-Reinsurance Loss Sensitive Contracts Schedule P-Interrogatories Schedule P-Interrogatories Schedule T-Exhibit of Premiums Written Schedule T-Part 2-Interstate Compact Schedule Y-Information Concerning Activities of Insurer Members of a Holding Company Group Schedule Y-Detail of Insurance Holding Company System Schedule Y-Detail of Insurance Holding Company System Schedule Y-Part 2-Summary of Insurer's Transactions With Any Affiliates Statement of Income Summary Investment Schedule Supplemental Exhibits and Schedules Interrogatories Underwriting and Investment Exhibit Part 1 Underwriting and Investment Exhibit Part 1B Underwriting and Investment Exhibit Part 1B	81 83 84 84 85 86 87 87 88 88 89 91 91 95 96 97 98 4 SIO1 99 6
Schedule P-Part 1D-Workers' Compensation (Excluding Excess Workers Compensation) Schedule P-Part 1E-Commercial Multiple Peril Schedule P-Part 1F-Section 1-Medical Professional Liability-Occurrence Schedule P-Part 1F-Section 2-Medical Professional Liability-Occurrence Schedule P-Part 1G-Special Liability (Ocean, Marine, Aircraft (All Perils), Boiler & Machinery) Schedule P-Part 1H-Section 1-Other Liability-Occurrence Schedule P-Part 1H-Section 2-Other Liability-Occurrence Schedule P-Part 1H-Section 2-Other Liability-Occurrence Schedule P-Part 1H-Section 2-Other Liability-Claims-Made Schedule P-Part 1J-Auto Physical Damage Schedule P-Part 1J-Auto Physical Damage Schedule P-Part 1K-Fidelity/Surety Schedule P-Part 1L-Other (Including Credit, Accident and Health) Schedule P-Part 1M-International Schedule P-Part 1N-Reinsurance - Nonproportional Assumed Property Schedule P-Part 1O-Reinsurance - Nonproportional Assumed Liability Schedule P-Part 1P-Reinsurance - Nonproportional Assumed Financial Lines Schedule P-Part 1R-Section 1-Products Liability-Occurrence Schedule P-Part 1R-Section 2-Products Liability-Claims-Made Schedule P-Part 1S-Financial Guaranty/Mortgage Guaranty Schedule P-Part 2, Part 3 and Part 4 - Summary Schedule P-Part 2-Part 2-Private Passenger Auto Liability/Medical Schedule P-Part 2-Part 2-Commercial Multiple Peril Schedule P-Part 2-Section 1-Medical Professional Liability-Occurrence Schedule P-Part 2-Section 1-Medical Professional Liability-Occurrence	38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 34 57 57 57 57 57 58 58	Schedule P-Part 5R-Products Liability-Occurrence Schedule P-Part 6C-Commercial Auto/Truck Liability/Medical Schedule P-Part 6D-Workers' Compensation (Excluding Excess Workers Compensation) Schedule P-Part 6B-Commercial Multiple Peril Schedule P-Part 6H-Other Liability-Claims-Made Schedule P-Part 6H-Other Liability-Cocurrence Schedule P-Part 6M-International Schedule P-Part 6N-Reinsurance - Nonproportional Assumed Property Schedule P-Part 6O-Reinsurance - Nonproportional Assumed Liability Schedule P-Part 6R-Products Liability-Claims-Made Schedule P-Part 6R-Products Liability-Claims-Made Schedule P-Part 7R-Primary Loss Sensitive Contracts Schedule P-Part 7R-Primary Loss Sensitive Contracts Schedule P-Part 7B-Reinsurance Loss Sensitive Contracts Schedule P-Part 7B-Reinsurance Loss Sensitive Contracts Schedule T-Exhibit of Premiums Written Schedule T-Part 2-Interstate Compact Schedule T-Part 2-Interstate Compact Schedule Y-Information Concerning Activities of Insurer Members of a Holding Company Group Schedule Y-Detail of Insurance Holding Company System Schedule Y-Part 2-Summary of Insurer's Transactions With Any Affiliates Statement of Income Summary Investment Schedule Supplemental Exhibits and Schedules Interrogatories Underwriting and Investment Exhibit Part 1 Underwriting and Investment Exhibit Part 1B Underwriting and Investment Exhibit Part 2 Underwriting and Investment Exhibit Part 2	81 83 84 84 85 86 87 87 87 88 88 89 91 93 94 95 96 97 98 4 SIO1 99 6 7
Schedule P-Part 1D-Workers' Compensation (Excluding Excess Workers Compensation) Schedule P-Part 1E-Commercial Multiple Peril Schedule P-Part 1F-Section 1-Medical Professional Liability-Occurrence Schedule P-Part 1F-Section 2-Medical Professional Liability-Claims-Made Schedule P-Part 1G-Special Liability (Ocean, Marine, Aircraft (All Perils), Boiler & Machinery) Schedule P-Part 1H-Section 1-Other Liability-Claims-Made Schedule P-Part 1H-Section 2-Other Liability-Claims-Made Schedule P-Part 1H-Section 2-Other Liability-Claims-Made Schedule P-Part 1J-Auto Physical Damage Schedule P-Part 1J-Auto Physical Damage Schedule P-Part 1L-Other (Including Credit, Accident and Health) Schedule P-Part 1M-International Schedule P-Part 1N-Reinsurance - Nonproportional Assumed Property Schedule P-Part 10-Reinsurance - Nonproportional Assumed Liability Schedule P-Part 1D-Reinsurance - Nonproportional Assumed Financial Lines Schedule P-Part 1R-Section 1-Products Liability-Occurrence Schedule P-Part 1S-Financial Guaranty/Mortgage Guaranty Schedule P-Part 1T-Warranty Schedule P-Part 2A-Homeowners/Farmowners Schedule P-Part 2A-Homeowners/Farmowners Schedule P-Part 2B-Private Passenger Auto Liability/Medical Schedule P-Part 2C-Commercial Auto/Truck Liability/Medical Schedule P-Part 2C-Commercial Auto/Truck Liability/Medical Schedule P-Part 2C-Commercial Multiple Peril Schedule P-Part 2F-Section 1-Medical Professional Liability-Occurrence	38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 34 57 57 57 57 58	Schedule P-Part 5R-Products Liability-Occurrence Schedule P-Part 6C-Commercial Auto/Truck Liability/Medical Schedule P-Part 6D-Workers' Compensation (Excluding Excess Workers Compensation) Schedule P-Part 6B-Commercial Multiple Peril Schedule P-Part 6B-Commercial Multiple Peril Schedule P-Part 6H-Other Liability-Claims-Made Schedule P-Part 6H-Other Liability-Occurrence Schedule P-Part 6M-International Schedule P-Part 6N-Reinsurance - Nonproportional Assumed Property Schedule P-Part 6O-Reinsurance - Nonproportional Assumed Liability Schedule P-Part 6R-Products Liability-Claims-Made Schedule P-Part 6R-Products Liability-Claims-Made Schedule P-Part 7A-Primary Loss Sensitive Contracts Schedule P-Part 7A-Primary Loss Sensitive Contracts Schedule P-Part 7B-Reinsurance Loss Sensitive Contracts Schedule P-Interrogatories Schedule P-Interrogatories Schedule T-Exhibit of Premiums Written Schedule T-Part 2-Interstate Compact Schedule Y-Information Concerning Activities of Insurer Members of a Holding Company Group Schedule Y-Detail of Insurance Holding Company System Schedule Y-Detail of Insurance Holding Company System Schedule Y-Part 2-Summary of Insurer's Transactions With Any Affiliates Statement of Income Summary Investment Schedule Supplemental Exhibits and Schedules Interrogatories Underwriting and Investment Exhibit Part 1 Underwriting and Investment Exhibit Part 1B Underwriting and Investment Exhibit Part 1B	81 83 84 84 85 86 87 87 88 88 89 91 91 95 96 97 98 4 SIO1 99 6